

Chapter 10 - Forms

Instructions to Generate SCAO Forms

The instructions to generate SCAO forms are designed to follow the SCAO form line by line. Each line from the form is duplicated and appears in italicized print. If information is taken from any juvenile screen to generate the line, the screen name, field name, and any applicable codes are listed next to the line. Notes are provided for those lines that require further information or clarification.

When entering information into the system to generate the form, go through the form, line by line. Then, using these instructions as a guide, check the information on the screen listed next to the line number to ensure that the fields contain up-to-date information. If the information needs to be added or changed, make any necessary entries on the screen.

~Forms Generation~

- ◆ **Creating the Form** - After all necessary information has been entered into the event and/or financial screen you may generate the form by entered the form number. For example to generate an "Order of Disposition/Child in Home", insert "17" in the form number request field and press <Enter>. All SCAO forms can be generated from an Event Add. Most orders can also be generated from Financial Order Add or Event Mod screens. Be sure the paper in the printer is loaded at top-of-form before printing out the order.
- ◆ **Modifying the Form** - To modify or reprint existing documents go to the Next Tran line and type "DOC/SUM along with the case number and suffix number then press <Enter>. The system will display all documents associated with this case. Place an "X" next to the document that you want to modify and press <Enter>. The document will be displayed on your screen. You may modify/delete any information that appears on the screen. Remember, the form will print exactly how it appears on the screen. Press <Enter> to save your changes. It is important to remember that any changes you make on this screen will not be made to the event. You should modify the event to match the changes made to the order.

Notice of Hearings, Summons and Proof of Service forms are not saved by the system. You must re-create these forms from the Event Screen.
- ◆ **Including Financial Orders** - To Include Financial Orders on a form using a multiple event add, answer "Y" to the question "Do you want to include Financial Orders?" Complete the rest of the Event Screen including the form number request field, do not change the Next Tran line and press <Enter>. The Financial Order Screen will be displayed for you to complete.

SCAO FORM #	FORM TITLE
JC03	Order Appointing Attorney/Guardian ad Litem/Lawyer-Guardian ad Litem
JC05	Order to Take/Place into Temporary Custody
JC06	Waiver of Request for Appointment of Attorney
JC09	Record of Preliminary Hearing (DL)
JC10	Order After Preliminary Hearing/Inquiry (DL)
JC11	Order After Preliminary Hearing/Inquiry - Child Not Removed (NA)
JC11A	Order After Preliminary Hearing - Child Removed from Home (NA)
JC12	Proof of Service/Non Service
JC13	Record of Trial/Plea
JC14	Order of Disposition (DL)
15	Motion and Authorization/Denial
17	Order of Disposition, Child in Home (NA)
19	Supplemental Order of Disposition Following Review Hearing
20	Summons Order to Appear (DL)
21	Summons Order to Appear (NA)
22	Blank Order
23	Waiver of Notice of Hearing
25	Order of Disposition, Commitment or Referral to FIA (NA)
26	Order of Disposition, Child Removed from Home (NA)
MC28	Notice to Prior Court of Proceedings Affecting Minor
36	Request and Order Terminating Court Jurisdiction
38	Order for Reimbursement
39	Order for Assignment of Wages
45	Notice of Hearing
57	Supplemental Order of Disposition Following Review Hearing (DL)
58	Order Cancelling Wage Assignment
59	Order of Adjudication (DL)
60	Notice of Intent to Intercept State Income Tax
61	Order to Intercept State Income Tax
62	Order to Cancel State Income Tax Intercept
63	Order Terminating Parental Rights Commitment to FIA (NA)
64	Order Following Permanency Planning Hearing (NA)
65	Order Removing Alleged Abuser from Child's Home
74	Order of Probation (Designated Case)
75	Order Removing Child After Emergency Removal Hearing
76	Order of Disposition Following Post-Termination Review Hearing
230	Motion and Order to Show Cause
258	Report of Non Payment of Restitution
309	Order for Adjournment

Document Summary Screen

The Document Summary screen displays all orders that have been created for a specific case. Orders can be modified, deleted or re-printed from this screen.

Accessing the Document Summary screen:

From the Transaction Request Screen, enter DOC/SUM along with the case number and suffix number then press <Enter>.

Juvenile Next Tran Line:

NXT	TRAN	DOC	TYPE	SUM	CASE	NBR	895019	___	PET	00000000	EVT	___	PTY	___
-----	------	-----	------	-----	------	-----	--------	-----	-----	----------	-----	-----	-----	-----

The system will display the following screen.

_	000003	4/01/1998	JC015
_	000004	4/01/1998	JC015
_	000005	4/01/1998	JC015
_	000007	4/01/1998	JC015
_	000008	4/01/1998	JC015
_	000009	4/01/1998	JC065
_	000010	4/01/1998	JC065
_	000011	4/01/1998	JC065
_	000012	4/01/1998	JC065
_	000013	4/01/1998	JC065
_	000014	4/01/1998	JC065
_	000015	4/08/1998	JC009A
_	000016	4/08/1998	JC009A
_	000017	4/08/1998	JC009A
_	000018	5/22/1998	JC009A
_	000019	5/22/1998	JC009A
_	000020	6/10/1998	JC015
_	000021	6/25/1998	JC015
_	000022	8/21/1998	JC005
_	000024	8/21/1998	JC005
_	000025	6/26/1998	JC006
_	000026	6/26/1998	JC003

F3 = EXIT ENTER X TO SELECT ENTER 4 TO DELETE PRESS ENTER TO PRINT

MA b A 02/002

Connected to remote server/host OSM SOUTH using port 23 \\SCAO\1N54QLS on Ne05:


Listed in document number order are all of the documents that have been entered on this case. The following are valid transactions that can be completed:

X = Select the document

4 = Delete the document

By entering one of the transactions on the line to the left of the document and pressing <Enter>, the system will either return the document for you to modify/re-print or the document will be deleted.

Option X - Select



The screenshot shows a window titled "B" with a list of orders. The first order, 000001, has an 'X' next to it. The list includes columns for order number, date, and code. At the bottom, there are instructions: "F3 = EXIT ENTER X TO SELECT ENTER 4 TO DELETE PRESS ENTER TO PRINT". The status bar at the bottom shows "03/002" and "1902 - Session successfully started".

Order Number	Date	Code
X 000001	4/10/2001	JC010
000002	4/10/2001	JC010
000003	4/10/2001	JC010
000004	4/10/2001	JC010
000005	4/10/2001	JC010
000006	4/10/2001	JC022
000007	4/10/2001	JC022
000008	9/18/2003	JC015

F3 = EXIT ENTER X TO SELECT ENTER 4 TO DELETE PRESS ENTER TO PRINT

03/002

1902 - Session successfully started \\SCAO\1N54QL5 on Ne05:

1. Enter an "X" next to the order that you want to select and press <Enter>. The system will display the order on the screen.

1. In the matter of 2 TEST NAME 123
(name(s), alias(es), DOB)

2. Date of hearing: 4/10/2001 REFEREE:

THE COURT FINDS:

3. The court has received a complaint or a petition alleging that the juvenile comes within the provisions of MCL 712A.2.

4. b. A preliminary hearing was held. Notice of hearing was given as required by law.

5. Probable cause does exist that one or more of the allegations in the petition are true.

F3 = EXIT PRESS ENTER TO PRINT

MP b 01/002

1902 - Session successfully started \\SCAO\1N54QL5 on Ne05:

2. Make any modifications necessary by using the <Page Up> and <Page Down> keys. If you want to re-print the document, press <Enter>. If you do not want to re-print or save any changes, press <F3>.

Option 4 - Delete

_	000003	4/01/1998	JC015
_	000004	4/01/1998	JC015
_	000005	4/01/1998	JC015
_	000007	4/01/1998	JC015
_	000008	4/01/1998	JC015
_	000009	4/01/1998	JC065
_	000010	4/01/1998	JC065
_	000011	4/01/1998	JC065
_	000012	4/01/1998	JC065
_	000013	4/01/1998	JC065
_	000014	4/01/1998	JC065
_	000015	4/08/1998	JC009A
_	000016	4/08/1998	JC009A
_	000017	4/08/1998	JC009A
_	000018	5/22/1998	JC009A
_	000019	5/22/1998	JC009A
_	000020	6/10/1998	JC015
_	000021	6/25/1998	JC015
_	000022	8/21/1998	JC005
4	000024	8/21/1998	JC005
_	000025	6/26/1998	JC006
_	000026	6/26/1998	JC003

F3 = EXIT ENTER X TO SELECT ENTER 4 TO DELETE PRESS ENTER TO PRINT

MP b A 22/002
Connected to remote server/host OSMSOUTH using port 23 \\SCAO\IN54QLS on Ne05:

1. Enter a "4" next to the order that you want to delete and press <Enter>. The system will delete the document.

Approved, SCAO	
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER APPOINTING ATTORNEY/GUARDIAN AD LITEM/ LAWYER-GUARDIAN AD LITEM
CASE NO. PETITION NO.	
Court address	Court telephone no.
<p>1. In the matter of (name(s), alias(es), DOB)</p> <p>2. THE COURT FINDS that the person(s) listed below are in need of an attorney/guardian ad litem/lawyer-guardian ad litem.</p> <p>IT IS ORDERED:</p> <p>3. _____ Name Bar no.</p> <p>Address City State Zip Telephone no.</p> <p>is appointed lawyer-guardian ad litem to represent the child(ren).</p> <p>4. The following are appointed attorney or guardian ad litem:</p> <p>a. _____ as <input type="checkbox"/> attorney. Name Bar no. <input type="checkbox"/> guardian ad litem.</p> <p>Address City State Zip Telephone no.</p> <p>Representing: Name Relationship to minor(s)</p> <p>b. _____ as <input type="checkbox"/> attorney. Name Bar no. <input type="checkbox"/> guardian ad litem.</p> <p>Address City State Zip Telephone no.</p> <p>Representing: Name Relationship to minor(s)</p> <p>c. _____ as <input type="checkbox"/> attorney. Name Bar no. <input type="checkbox"/> guardian ad litem.</p> <p>Address City State Zip Telephone no.</p> <p>Representing: Name Relationship to minor(s)</p> <p>5. If a guardian ad litem is appointed for a child in a child protective proceeding, the guardian ad litem shall assist the court in determining the child's best interests.</p> <p>6. In proceedings under MCL 712A.2(b) and (c), the attorney appointed for the child shall serve as the child's legal advocate.</p> <p>7. This appointment will be for purposes of representation in the family division of the circuit court only, unless otherwise ordered by the judge.</p>	
Date	Judge
Do not write below this line - For court use only	
<div style="text-align: right;">MCL 712A.17c(9), MCL 712A.17d(2), MCR 3.915, MCR 3.916</div> <div>JC 03 (6/03) ORDER APPOINTING ATTORNEY/GUARDIAN AD LITEM/LAWYER-GUARDIAN AD LITEM</div>	

**Order Appointing Attorney/Guardian Ad Litem/
Lawyer-Guardian Ad Litem
06/03 - JC03**

This order can be generated from an event ADD or MOD. From the event screen, enter the date the hearing took place, the event type code and all data for the form. Enter 03 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>THE COURT FINDS: that the person(s) listed below are in need of an attorney/guardian ad litem/lawyer-guardian ad litem.</i> NOTE: This line will always print			
IT IS ORDERED: 3. <i>_____ Is appointed lawyer-guardian ad litem to represent the child(ren).</i>	EVENT	Type Attny	ATP Attorney Bar #
4. <i>The following are appointed attorney or guardian ad litem:</i> <i>a. (attorney name, bar number, address)</i> <i>Representing: (name, relationship)</i> <i>b. (attorney name, bar number, address)</i> <i>Representing: (name, relationship)</i> <i>c. (attorney name, bar number, address)</i> <i>Representing: (name, relationship)</i>	PARTY CASE EVENT PARTY EVENT PARTY	Party Type Name Attny Bar # Party Type Attny Bar # Party Type	GAL
<i>If a guardian ad litem is appointed for a child in a child protective proceeding, the guardian ad litem shall assist the court in determining the child's best interest.</i> NOTE: This line will always print.			
6. <i>In proceedings under MCL 712A.2(b) and (c), the attorney appointed for the child shall serve as the child's legal advocate.</i> NOTE: This line will always print.			
7. <i>This appointment will be for purposes of representation in the family division of the circuit court only, unless otherwise ordered by the judge.</i> NOTE: This line will always print.			
Signature Line	EVENT	Date/Jurist	

Approved, SCAO				
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	PETITION <input type="checkbox"/> Supplemental	CASE NO. PETITION NO.		
Court address			Court telephone no.	
ORI MI-	Police agency report no.	CTN	TCN	SID
1. In the matter of (name(s), alias(es), date(s) of birth)				DLN
2. The above named <input type="checkbox"/> minor(s) come(s) within the provisions of MCL 712A.2. <input type="checkbox"/> juvenile has violated probation as follows: Citations and allegations:				
<input type="checkbox"/> See attached sheet for further allegations. <input type="checkbox"/> Member of or eligible for membership in American Indian Tribe or Band, state above.				
<input type="checkbox"/> 3. An action within the jurisdiction of the family division of circuit court involving the family or family members of the minor has been previously filed in _____ Court, Case Number _____, was assigned to Judge _____, and <input type="checkbox"/> remains <input type="checkbox"/> is no longer pending.				
<input type="checkbox"/> 4. I designate this case as a case in which the juvenile is to be tried in the same manner as an adult.				
5. The above named minor(s) is/(are) resident(s) of _____ County, and reside(s) in the care and custody of _____.				
6. The names and addresses of the parents, guardians, legal custodians, or nearest known relative are as follows:				
NAME	ADDRESS	HOME PHONE	WORK PHONE	
Father Putative <input type="checkbox"/>				
Mother				
Guardian/Legal custodian/Nearest known relative				
7. I request the court to: (check either box a or b) <input type="checkbox"/> a. review the information and make an appropriate decision. <input type="checkbox"/> b. authorize this petition and				
<input type="checkbox"/> 1) issue an order <input type="checkbox"/> detaining the juvenile. <input type="checkbox"/> removing <input type="checkbox"/> the child <input type="checkbox"/> the abuser from the home. <input type="checkbox"/> 2) terminate <input type="checkbox"/> mother's parental rights. <input type="checkbox"/> father's parental rights. <input type="checkbox"/> 3) find the minor in contempt of court for violating a minor personal protection order. <input type="checkbox"/> 4) find the juvenile has violated probation and <input type="checkbox"/> notify juvenile to appear for hearing. <input type="checkbox"/> order juvenile apprehended and brought to court for a detention hearing. <input type="checkbox"/> 5) designate this case as a case in which the juvenile is to be tried in the same manner as an adult.				
I declare that the statements in this petition are true to the best of my information, knowledge, and belief.				
Petitioner's signature		Date	Agency/Address	
Print or type name		City, state, and zip	Telephone no.	
8. A preliminary inquiry and/or hearing has been conducted and the filing of this petition <input type="checkbox"/> is <input type="checkbox"/> is not authorized.				
Date		Judge/Referee	Bar no.	
Do not write below this line - For court use only				
JC 04 (6/03) PETITION		MCL 600.2950h-600.2950m, MCL 712A.2, MCL 712A.2d, MCL 712A.2h, MCL 764.15b, MCR 3.903(A)(19), MCR 3.931, MCR 3.961, MCR 3.983		

Petition 06/03 - JC04

This petition can be generated from the transaction request line after the case and petition have been entered into the system.

At the transaction request line, enter PET/PRT along with the case number and the petition number and then press <Enter>. The following screen will be displayed

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MARK WITH "X" OR FILL IN APPROPRIATE BLANKS
_ SUPPLEMENT      ORI _____ _ PROVISION MCL712 _ VIOLATION OF PROBATION
_ VIOLATION OF VALID PERSONAL/FOREIGN PROTECTION ORDER.
_ THIS PETITION CONTAINS A REPORTABLE OFFENSE UNDER _____ .
_ SEE ATTACHED SHEET FOR FURTHER ALLEGATIONS.
_ MEMBER OF OR ELIGIBLE FOR AMERICAN INDIAN TRIBE/BAND _____
_ 3. ENTER THE FOLLOWING: COURT CASE PREVIOUSLY FILED _____
   CASE NUMBER _____
   JUDGE ASSIGNED TO CASE _____
   _ REMAINS _ IS NO LONGER PENDING
_ 4. I DESIGNATE THIS CASE AS A CASE IN WHICH THE JUVENILE IS TO BE TRIED IN
   THE SAME MANNER AS AN ADULT.
5. ENTER THE FOLLOWING: COUNTY MINOR(S) IS/ARE RESIDENT OF _____
   IN CARE AND CUSTODY OF _____

_ 7. REVIEW INFORMATION _ AUTHORIZE PETITION AND
_ 1) ISSUE ORDER _ DETAIN JUVENILE _ REMOVING _ THE CHILD _ THE ABUSER
_ 2) TERMINATE _ MOTHER(S) _ FATHER(S)
_ 3) MINOR VIOLATES PERSONAL PROTECTION ORDER
_ 4) VIOLATES PROBATION _ NOTIFY HEARING _ ORDER TO APPREHEND
_ 5) DESIGNATE JUVENILE TRY SAME AS ADULT

_ 8. FILING OF PETITION _ IS _ IS NOT AUTHORIZED
F3 = EXIT
  
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02/002

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1. Place an "X" next to each item that applies to the petition and press <Enter>. The following screen will appear.

NOTE: Line "6" is not displayed on the screen for modifications, however, it will print with the names and addresses of the father, mother, guardian, etc. as taken from the party screen.

Approved, SCAO		CASE NO.
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER TO <input type="checkbox"/> APPREHEND/DETAIN (DELINQUENCY, MINOR PERSONAL PROTECTION) <input type="checkbox"/> PLACE INTO PROTECTIVE CUSTODY	PETITION NO.
Court address		Court telephone no.
1. In the matter of _____ (name(s), alias(es), DOB) (see reverse side for other identifying information)		Police Report No: _____
2. Date of hearing: _____ Judge: _____ Bar no. _____		
3. TO: Any peace officer or _____		
4. It appears to the court upon the filing of a petition, together with further proofs as required by the court, that there are reasonable grounds for removal of the minor(s) from the parent, guardian, or legal custodian by this court in compliance with MCL 712A.2, MCR 3.933(B), MCR 3.963(B), or MCR 3.983 because:		
<input type="checkbox"/> a. conditions or surroundings of the child(ren) are such as to endanger the health, safety, or welfare of the child(ren) and it is contrary to the welfare of the child(ren) to remain in the home because _____		
<input type="checkbox"/> b. minor(s) is(are) eluding or is(are) being illegally detained or concealed from the parent, guardian, or legal custodian. There is probable cause to believe the minor can be found at _____		
<input type="checkbox"/> c. juvenile is charged with committing an offense that would provide authority for issuance of a warrant were the juvenile an adult. Date of offense: _____ Offense: _____		
<input type="checkbox"/> d. minor(s) is(are) absent without leave from an institution or facility to which s/he was committed pursuant to section 18.		
<input type="checkbox"/> e. juvenile has violated probation.		
<input type="checkbox"/> f. juvenile has failed to appear for a hearing on a petition charging violation of MCL 712A.2.		
<input type="checkbox"/> g. minor is alleged to have violated a valid minor personal protection order issued under MCL 712A.2(h) or out-state law.		
<input type="checkbox"/> h. it appears there is a substantial likelihood of retaliation or continued violation.		
IT IS ORDERED:		
5. The minor(s) shall be taken into protective custody/apprehended and:		
<input type="checkbox"/> a. brought before this court or temporarily detained/placed at _____ _____ pending preliminary hearing.		
<input type="checkbox"/> b. placed at _____ for medical observation and treatment until medically released to _____ for placement at _____ pending preliminary hearing.		
<input type="checkbox"/> c. other: _____		
6. To effect this order you are authorized to enter the premises located at: _____		
7. The parent(s), guardian(s), or legal custodian(s) of the minor(s) shall be directed to appear for a preliminary hearing in this matter to be held on _____ at _____.		
Date	Judge	
If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you to fully participate in court proceedings, please contact the court immediately to make arrangements.		
<input type="checkbox"/> Enter on LEIN		
ORDER EXPIRES: _____ Date: _____	Do not write below this line - For court use only	
MCL 712A.2c, MCL 712A.15, MCR 3.933(B), (C), MCR 3.934(B), MCR 3.944(A), JC 05 (6/03) ORDER TO APPREHEND/DETAIN OR TO PLACE INTO PROTECTIVE CUSTODY MCR 3.963(B), (C), MCR 3.983(B), (D)		

Order to ☐ Apprehend/Detain (Delinquency, Minor Personal Protection)
☐ Place into Protective Custody
06/03 - JC05

This order can be generated from an event ADD or MOD. From the event screen, enter the date the hearing took place, the event type code and all data for the form. Enter 05 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing:</i> <i>Judge:</i>	EVENT	Date Jurist	
3. <i>TO: Any peace officer or _____</i>			
NOTE: This line will always print.			
4. <i>It appears to the court upon the filing of a petition, together with further proofs as required by the court, that there are reasonable grounds for removal of the minor(s) from the parent, guardian, or legal custodian by this court in compliance with MCL 712A.2, MCR 3.933(B), MCR 3.963(B), or MCR 3.983 because:</i> <input type="checkbox"/> a. <i>conditions or surrounds of the child(ren) are such as to endanger the health, safety, or welfare of the child(ren) and it is contrary to the welfare of the child(ren) to remain in the home because.</i> <input type="checkbox"/> b. <i>minor(s) is(are) eluding or is(are) being illegally detained or concealed from the parent, guardian, or legal custodian. There is probable cause to believe the minor can be found at ____.</i> <input type="checkbox"/> c. <i>juvenile is charged with committing an offense that would provide authority for issuance of a warrant pursuant to section 18.</i> <input type="checkbox"/> d. <i>minor(s) is(are) absent without leave from an institution or facility to which s/he was committed pursuant to section 18.</i> <input type="checkbox"/> e. <i>juvenile has violated probation.</i> <input type="checkbox"/> f. <i>juvenile has failed to appear for a hearing on a petition charging violation of MCL 712A.2.</i> <input type="checkbox"/> g. <i>minor is alleged to have violated a valid minor personal protection order issued under MCL 712A.2(h) or out of state law.</i> <input type="checkbox"/> h. <i>it appears there is a substantial likelihood of retaliation or continued violation.</i>	PARTY CASE EVENT PARTY EVENT PARTY	Party Type Name Attny Bar # Party Type Attny Bar # Party Type	GAL
NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
IT IS ORDERED: 5. <i>The minor(s) shall be:</i> <input type="checkbox"/> a. <i>brought before this court or placed in temporary custody at _____ pending prelim hrg.</i> <input type="checkbox"/> b. <i>placed at _____ for medical observation and treatment until medically released to ____ for placement at _____ pending preliminary hearing.</i> <input type="checkbox"/> c. <i>other: _____</i> NOTE: This line will always print.			
6. <i>To effect this order you are authorized to enter the premisses located at.</i> NOTE: This line will always print			
7. <i>The parent(s), guardians, or legal custodian(s) of the minor(s) shall be directed to appear for a preliminary hearing in this matter to be held on _____ at _____.</i>	EVENT	Next Hearing	PRH
Signature Line	EVENT	Date Jurist	
<i>If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you to fully participate in court proceedings, please contact the court immediately to make arrangements.</i> <input type="checkbox"/> Enter on LEIN ORDER EXPIRES: <input type="text"/> NOTE: This line will always print.			

Approved, SCAO					
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 5px; text-align: center;"> WAIVER OF ATTORNEY OR REQUEST FOR APPOINTMENT OF ATTORNEY </td> <td style="width: 40%; padding: 5px; vertical-align: top;"> CASE NO. PETITION NO. </td> </tr> </table>	WAIVER OF ATTORNEY OR REQUEST FOR APPOINTMENT OF ATTORNEY	CASE NO. PETITION NO.		
WAIVER OF ATTORNEY OR REQUEST FOR APPOINTMENT OF ATTORNEY	CASE NO. PETITION NO.				
Court address	Court telephone no.				
1. In the matter of (name(s), alias(es), DOB)					
<div style="border: 1px solid black; display: inline-block; padding: 5px 20px;">WAIVER OF ATTORNEY</div>					
<input type="checkbox"/> 2. I understand I have the right to be represented by an attorney at all hearings in the family division of the circuit court. If I am the juvenile, and I or the person responsible for my support cannot afford an attorney or refuses or neglects to retain an attorney for me, the court will appoint an attorney to represent me. I freely waive the right to the assistance of an attorney.					
Date	Juvenile/Respondent signature				
3. I, as parent, guardian, legal custodian, or guardian ad litem, agree with the above waiver of the assistance of an attorney.					
Date	Parent/Guardian/Legal custodian/Guardian ad litem signature				
4. I have explained the right to the assistance of an attorney as provided by law and court rule and am satisfied that the above waiver is voluntarily and understandingly made. I accept the waiver.					
Date	Judge/Referee Bar no.				
<div style="border: 1px solid black; display: inline-block; padding: 5px 20px;">REQUEST FOR APPOINTMENT OF ATTORNEY</div>					
<input type="checkbox"/> 5. I declare that I am unable to pay fully for the services of an attorney and request that an attorney be appointed by the court. I understand that I may be ordered to reimburse the court for all or part of the attorney fees and that when an attorney is appointed for a juvenile, that the court may assess some or all of the costs against the persons responsible for the support of the juvenile. I authorize the court to investigate and obtain relevant information from my employer, creditors, and others who have knowledge of my financial circumstances for purposes of aiding the court in determining my eligibility for the appointment of an attorney.					
Juvenile signature	Date				
Parent/Guardian/Legal custodian/Respondent	Date				
Name (type or print)	Name (type or print)				
Address	Address				
City, state and zip	Telephone no.				
City, state and zip	Telephone no.				
6. Witnessed by: <table style="width: 100%; border: none;"> <tr> <td style="border-bottom: 1px solid black; width: 60%;"></td> <td style="border-bottom: 1px solid black; width: 40%;"></td> </tr> <tr> <td style="text-align: center; font-size: small;">Name</td> <td style="text-align: center; font-size: small;">Date</td> </tr> </table>				Name	Date
Name	Date				
<div style="border: 1px solid black; padding: 5px; margin-top: 20px;"> Do not write below this line - For court use only </div>					
<div style="display: flex; justify-content: space-between; font-size: small;"> JC 06 (6/03) WAIVER OR REQUEST FOR APPOINTMENT OF ATTORNEY MCR 3.915, MCR 3.935(B)(4), MCR 3.942(B)(3), MCR 3.944(B)(4),(C)(1)(b), MCR 3.946(C)(2), MCR 3.951(A)(2)(b)(i), MCR 3.985(B)(3), MCR 3.987(C)(3) </div>					

Waiver of Attorney or Request for Appointment of Attorney 06/03 - JC06

This form can be generated from an event ADD or MOD. From the event screen, enter the date, the event type code and all data for the form. Enter 06 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
<div style="border: 1px solid black; padding: 2px; margin-bottom: 10px;">WAIVER OF ATTORNEY</div> <p><input type="checkbox"/> 2. <i>I understand I have the right to be represented by an attorney at all hearings in the family division of the circuit court. If I am the juvenile, and I or the person responsible for my support cannot afford an attorney or refuses or neglects to retain an attorney for me, the court will appoint an attorney to represent me. I freely waive the right to the assistance of an attorney.</i></p> <p><i>Juvenile/Respondent Signature Line</i> NOTE: This line will always print.</p>			
<p>3. <i>I, as parent, guardian, legal custodian, or guardian ad litem, agree with the above waiver of the assistance of an attorney.</i></p> <p><i>Parent/Guardian Signature Line</i> NOTE: This line will always print.</p>			
<p>4. <i>I have explained the right to the assistance of an attorney as provided by law and court rule and am satisfied that the above waiver is voluntarily and understandingly made. I accept the waiver.</i></p> <p><i>Judge/Referee</i> NOTE: This line will always print.</p>			
<div style="border: 1px solid black; padding: 2px; margin-bottom: 10px;">REQUEST FOR APPOINTMENT OF ATORNEY</div> <p><input type="checkbox"/> 5. <i>I declare that I am unable to pay fully for the services of an attorney and request that an attorney be appointed by the court. I understand that I may be ordered to reimburse the court for all or part of the attorney fees and that when an attorney is appointed for a juvenile, that the court may assess some or all of the costs against the persons responsible for the support of the juvenile. I authorize the court to investigate and obtain relevant information from my employer, creditors, and others who have knowledge of my financial circumstances for purposes of aiding the court in determining my eligibility for the appointment of an attorney.</i></p> <p><i>Signature Lines</i> NOTE: This line will always print.</p>			

Approved, SCAO

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY _____	RECORD OF PRELIMINARY HEARING (DELINQUENCY PROCEEDINGS) PAGE 1	CASE NO. PETITION NO.
Court address _____		Court telephone no. _____
1. In the matter of (name(s), alias(es), DOB) _____		
2. Date _____	3. Name _____ <div style="text-align: right;"><input type="checkbox"/> Judge <input type="checkbox"/> Referee</div>	
PARTIES PRESENT		
4. Parent(s)	8. Attorney	
5. Stepparent/Guardian/Legal custodian	9. Guardian ad litem	
6. Juvenile	10. Other	
7. Petitioner	11. Other	
PROCEDURE/ADVICE OF RIGHTS (on reverse)		
SUMMARY of findings and recommendations (summarize testimony if taken)		
<div style="padding-left: 20px;">12. The juvenile is being detained, is represented by an attorney, and waived the probable cause determination.</div> <div style="padding-left: 20px;">13. There <input type="checkbox"/> is <input type="checkbox"/> is not probable cause to believe the juvenile committed the offense(s).</div> <div style="padding-left: 20px;"><input type="checkbox"/> 14. The juvenile is charged with an offense that requires fingerprinting and has not been fingerprinted.</div> <div style="padding-left: 20px;"><input type="checkbox"/> 15. <input type="checkbox"/> a. The offense alleged is so serious that release would endanger public safety.</div> <div style="padding-left: 40px;"><input type="checkbox"/> b. The juvenile is charged with a felony offense and will likely commit another offense pending trial if released, and <input type="checkbox"/> another petition is pending against the juvenile. <input type="checkbox"/> the juvenile is on probation.</div> <div style="padding-left: 40px;"><input type="checkbox"/> c. There is substantial likelihood that if the juvenile is released to the parent, guardian, or legal custodian (with or without conditions), the juvenile will fail to appear at the next court proceeding.</div> <div style="padding-left: 40px;"><input type="checkbox"/> d. The home conditions of the juvenile make detention necessary.</div> <div style="padding-left: 40px;"><input type="checkbox"/> e. The juvenile has run away from home.</div> <div style="padding-left: 40px;"><input type="checkbox"/> f. The juvenile has failed to remain in a detention facility or nonsecure facility or placement (in violation of valid court order).</div> <div style="padding-left: 40px;"><input type="checkbox"/> g. Pretrial detention is otherwise specifically authorized by law.</div> <div style="padding-left: 40px;"><input type="checkbox"/> h. The juvenile is alleged to have violated a personal protection order and it appears there is a substantial likelihood of retaliation or continued violation.</div> <div style="padding-left: 20px;"><input type="checkbox"/> 16. The juvenile is a member of or eligible for membership in an American Indian tribe or band, named _____ _____(complete and mail Form JC 48). Findings have been made on the record.</div> <div style="padding-left: 20px;"><input type="checkbox"/> 17. Continuation of residence in the home would be contrary to the welfare, or placement would be in the best interest, of the juvenile because _____</div> <div style="padding-left: 20px;"><input type="checkbox"/> 18. Based on <input type="checkbox"/> the following findings (attach list if more space is needed)</div> <div style="padding-left: 40px;"><input type="checkbox"/> the report _____ dated _____ Identify type of report</div> <div style="padding-left: 40px;"><input type="checkbox"/> testimony of _____ backed up by written transcript Name</div> <div style="padding-left: 40px;">reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made prior to the placement of the juvenile in foster or other out-of-home care, to prevent or eliminate the need for removing the juvenile from his/her home.</div>		

(SEE SECOND PAGE)

PL - 96 272, 42 USC 670 et seq., MCL 712A.2, MCL 712A.10(1)(c),
MCL 712A.11, MCL 712A.14, MCL 712A.15, MCR 3.935, MCR 3.980

JC 09 (6/03) RECORD OF PRELIMINARY HEARING (DELINQUENCY PROCEEDINGS), PAGE 1

Record of Preliminary Hearing (Delinquency Proceedings) 06/03 - JC09

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 09 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date</i>	EVENT	Date	
3. <i>Name</i>	EVENT	Jurist	
4. <i>Parent(s)</i> 8. <i>Attorney</i> 5. <i>Stepparent/Gdn/Lgl Cust</i> 9. <i>Gdn Ad Litem</i> 6. <i>Juvenile</i> 10. <i>Other</i> 7. <i>Petitioner</i> 11. <i>Other</i>			
NOTE: This line will always print.			
PROCEDURE/ADVICE OF RIGHTS (on reverse) SUMMARY of findings and recommendations (summa- rize testimony if taken)			
NOTE: This line will always print			
<input type="checkbox"/> 12. <i>The juvenile is being detained, is represented by an attorney, and waived the probable cause determination.</i>			
NOTE: This line will always print.			
13. <i>There <input type="checkbox"/> is <input type="checkbox"/> is not probable cause to believe the juvenile committed the offense(s).</i>	EVENT	Result	PCF
NOTE: "is not" will print unless "PCF" is entered in the results and then "is" will print.			
14. <i>Juvenile is charged with an offense that requires fingerprinting and he/she has not been finger- printed.</i>			
NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 15. <input type="checkbox"/> a. <i>The offense alleged is so serious that release would endanger public safety.</i> <input type="checkbox"/> b. <i>The juvenile is charged with a felony offense and will likely commit another offense pending trial if released, and</i> <input type="checkbox"/> another petn is pending against the juvenile. <input type="checkbox"/> the juvenile is on probation <input type="checkbox"/> the juvenile has a prior adjudication but was not under the court's jurisdiction at the time of the apprehension. <input type="checkbox"/> c. <i>There is substantial likelihood that if the juvenile is released to the parent, guardian, or legal custodian(with or without conditions) the juvenile will fail to appear at the next court proceeding.</i> <input type="checkbox"/> d. <i>the home conditions of the juvenile make detention necessary.</i> <input type="checkbox"/> e. <i>The juvenile has run away from home.</i> <input type="checkbox"/> f. <i>The juvenile has failed to remain in a detention facility or nonsecure facility or placement (in violation of valid court order).</i> <input type="checkbox"/> g. <i>Pretrial detention is otherwise specifically authorized by law.</i> <input type="checkbox"/> h. <i>the juvenile is alleged to have violated a personal protection order and it appears there is a substantial likelihood of retaliation or continued violation.</i> NOTE: If custody field on the event screen is "ICU", line 14 will print in its entirety to be filled in manually by the user.	EVENT	Custody	ICU
<input type="checkbox"/> 16. <i>The juvenile is a member of or eligible for membership in an American Indian tribe or band named _____ (complete and mail form JC 48). Findings have been made on the record.</i>	CASE	Race	AI
<input type="checkbox"/> 17. <i>Continuation of residence in the home would be contrary to the welfare or placement would be in the best interest of the juvenile because</i> NOTE: This line will automatically print.	EVENT	Jurist	
<input type="checkbox"/> 18. <i>Based on</i> <input type="checkbox"/> the following findings (attach list if more space is needed) <input type="checkbox"/> the report _____ dated _____ <input type="checkbox"/> testimony of _____ backed up by written transcript reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made prior to the placement of the juvenile in foster or other out-of-home care, to prevent or eliminate the need for removing the juvenile from his/her home.			

Line From the Order Form	Screen	Field	Codes
<i>PRELIMINARY DISPOSITION (Fill out completely)</i>			
<p><i>A preliminary hearing was conducted as provided by the court rules and it appears that the best interests of the juvenile and the public will be served.</i></p> <p>IT IS RECOMMENDED/ORDERED:</p> <p><input type="checkbox"/> 19. <i>The petition is <input type="checkbox"/> authorized for filing <input type="checkbox"/> not authorized for filing and is <input type="checkbox"/> placed on the consent calendar. <input type="checkbox"/> referred to alternate services. <input type="checkbox"/> dismissed.</i></p> <p>NOTE: AUT or PST result will mark "authorized for filing". Nap will mark "Not authorized"</p>	EVENT	Result	AUT or PST (Be) NAP (Not Be)
<p><input type="checkbox"/> 20. <i>The Juvenile is released to _____ under the terms and conditions in item 24.</i></p> <p>NOTE: This line will automatically print.</p>	EVENT	Placement	PTS, F01, M01, GDN, CUS
<p><input type="checkbox"/> 21. <i>The juvenile is temporarily placed with/detained at: _____.</i></p> <p><input type="checkbox"/> Bond be set at: \$ _____.</p>	EVENT EVENT	Placement Bond Amount	Any Placement except those in 19.
<p><input type="checkbox"/> 22. <i>The juvenile shall be fingerprinted in accordance with the Order for Fingerprints (form MC233).</i></p> <p>NOTE: This line will always print.</p>			
<p><input type="checkbox"/> 23. <i>The preliminary hearing is adjourned until: ____.</i></p>	EVENT EVENT	Result Next Hearing	ADJ PRH
<p><input type="checkbox"/> 24. <i>Other:</i></p> <p>NOTE: This line will always print.</p>			
<i>Signature Line</i>	EVENT	Sign Jurist	Jurist #
<p>CHECKLIST FOR ADVICE OF RIGHTS AND GENERAL PROCEDURE FOR PRELIMINARY HEARING</p> <p>NOTE: The checklist section will always print at the end of the order.</p>			

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER AFTER PRELIMINARY HEARING/INQUIRY (DELINQUENCY / PERSONAL PROTECTION) PAGE 1	CASE NO. PETITION NO.
Court address		Court telephone no.
1. In the matter of (name(s), alias(es), DOB)		
2. Date of hearing: _____ Judge/Referee: _____ Bar no.		
THE COURT FINDS:		
3. The court has received a complaint or a petition alleging that the juvenile comes within the provisions of MCL 712A.2.		
4. <input type="checkbox"/> a. A preliminary inquiry has been made, and it is in the interests of the public and the juvenile that the petition <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <input type="checkbox"/> not be authorized. <input type="checkbox"/> be set for further inquiry. </div> <div> <input type="checkbox"/> be referred to alternate services. <input type="checkbox"/> be set for preliminary hearing on the formal calendar. </div> <div> <input type="checkbox"/> be placed on the consent calendar. </div> </div>		
<input type="checkbox"/> b. ¹ A preliminary hearing was held. Notice of hearing was given as required by law.		
<input type="checkbox"/> 5. There <input type="checkbox"/> is <input type="checkbox"/> is not probable cause to believe the juvenile committed the offense(s).		
<input type="checkbox"/> 6. The juvenile is being detained, is represented by an attorney, and waived the probable cause determination.		
<input type="checkbox"/> 7. The juvenile is charged with an offense that requires fingerprinting and has not been fingerprinted.		
<input type="checkbox"/> 8. It is contrary to the welfare of the juvenile to remain in the home or placement would be in the best interests of the juvenile because <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>		
<input type="checkbox"/> 9. <input type="checkbox"/> a. The offense alleged is so serious that release would endanger public safety. <div style="margin-left: 20px;"> <input type="checkbox"/> b. The juvenile is charged with a felony offense and will likely commit another offense pending trial if released, and <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <input type="checkbox"/> another petition is pending against the juvenile. <input type="checkbox"/> the juvenile has a prior adjudication but was not under the court's jurisdiction at the time of apprehension. </div> <div> <input type="checkbox"/> the juvenile is on probation. </div> </div> </div> <div style="margin-left: 20px;"> <input type="checkbox"/> c. There is substantial likelihood that if the juvenile is released to the parent, guardian, or legal custodian (with or without conditions), the juvenile will fail to appear at the next court proceeding. </div> <div style="margin-left: 20px;"> <input type="checkbox"/> d. the home conditions of the juvenile make detention necessary. </div> <div style="margin-left: 20px;"> <input type="checkbox"/> e. the juvenile has run away from home. </div> <div style="margin-left: 20px;"> <input type="checkbox"/> f. the juvenile has failed to remain in a detention facility or nonsecure facility or placement (in violation of valid court order). </div> <div style="margin-left: 20px;"> <input type="checkbox"/> g. Pretrial detention is otherwise specifically authorized by law. </div> <div style="margin-left: 20px;"> <input type="checkbox"/> h. The juvenile is alleged to have violated a personal protection order and it appears there is a substantial likelihood of retaliation or continued violation. </div>		
<input type="checkbox"/> 10. The juvenile is a member of or eligible for membership in an American Indian tribe or band named _____ (complete and mail Form JC 48). Findings have been made on the record.		
¹ Do not check this item if disposition is based on preliminary inquiry or investigation only. Note that preliminary hearings are mandatory in matters where a juvenile is not released.		
Do not write below this line - For court use only		
(SEE SECOND PAGE)		

PL - 96 - 272, 42 USC 670 et seq., MCL 712A.2, MCL 712A.11, MCL 712A.14, MCL 712A.15, MCR 3.932, MCR 3.935, MCR 3.980
 JC 10 (6/03) ORDER AFTER PRELIMINARY HEARING/INQUIRY (DELINQUENCY/PERSONAL PROTECTION), PAGE 1

**Order After Preliminary Hearing/Inquiry
(Delinquency Proceedings)/(Personal Protection Proceedings)
06/03 - JC10**

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 10 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
THE COURT FINDS: 3. <i>The court has received a complaint or a petition alleging that the juvenile comes within the provisions of MCL 712A.2.</i> NOTE: This line will always print.			
4. <input type="checkbox"/> a. <i>A preliminary inquiry has been made, and it is in the best interests of the public and the juvenile that the petition</i> <input type="checkbox"/> <i>not be authorized</i> <input type="checkbox"/> <i>be referred to alternate services.</i> <input type="checkbox"/> <i>be placed on the consent calendar.</i> <input type="checkbox"/> <i>be set for further inquiry</i> <input type="checkbox"/> <i>be set for preliminary hearing on the formal calendar.</i> NOTE: This line will always print. <input type="checkbox"/> b. <i>1 A preliminary hearing was held. Notice of hearing was given as required by law.</i>	EVENT	Type	PRH
<input type="checkbox"/> 5. <i>There</i> <input type="checkbox"/> <i>is</i> <input type="checkbox"/> <i>is not probably cause to believe the juvenil committed the offense(s).</i> NOTE: "is not" will print unless "PCF" is entered in the results and then "is" will print.	EVENT	Result	PCF
<input type="checkbox"/> 6. <i>The juvenile is being detained, is represented by an attorney, and waived the proable cause determination.</i>	EVENT	Custody Attny Result	ICU Attny Bar # PWA
<input type="checkbox"/> 7. <i>The juvenile is charged with an offense that requires fingerprinting and he/she has not been fingerprinted.</i> NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 8. <i>It is contrary to the welfare of the child(ren) to remain in the home because _____.</i> NOTE: This line will always print.			
<input type="checkbox"/> 9. <input type="checkbox"/> a. <i>The offense alleged is so serious that release would endanger public safety.</i> <input type="checkbox"/> b. <i>The juvenile is charged with a felony offense and will likely commit another offense pending trial if released, and</i> <input type="checkbox"/> another petition is pending against the juvenile. <input type="checkbox"/> the juvenile is on probation <input type="checkbox"/> the juvenile has a prior adjudication but was not under the court's jurisdiction at the time of the apprehension. <input type="checkbox"/> c. <i>There is substantial likelihood that if the juvenile is released to the parent, guardian, or legal custodian(with or without conditions), the juvenile will fail to appear at the next court hearing.</i> <input type="checkbox"/> d. <i>the home conditions of the juvenile make detention necessary.</i> <input type="checkbox"/> e. <i>the juvenile has run away from home.</i> <input type="checkbox"/> f. <i>the juvenile has failed to remain in a detention facility or nonsecure facility or placement (in violation of valid court order).</i> <input type="checkbox"/> g. <i>Pretrial detention is otherwise specifically authorized by law.</i> <input type="checkbox"/> h. <i>The juvenile is alleged to have violated a personal protection order and it appears there is a substantial likelihood of retaliation or continued violation.</i> NOTE: This entire line will print if custody is ICU.	EVENT	Custody	ICU
<input type="checkbox"/> 10. <i>The juvenile is a member of or eligible for membership in an American Indian tribe or band named _____ (complete and mail form JC48). Findings have been made on the record.</i>	CASE	Race	AI
<input type="checkbox"/> 11. <i>Based on</i> <input type="checkbox"/> the following findings (attach list if more space is needed) <input type="checkbox"/> the report _____ dated _____ <input type="checkbox"/> testimony of _____ backed up by written transcript reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made prior to the placement of the juvenile in foster or other out-of-home care, to prevent or eliminate the need for removing the child(ren) from the child(ren)'s home. NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
IT IS ORDERED:	EVENT	Result	PDN
<input type="checkbox"/> 12. The petition is not authorized.			
<input type="checkbox"/> 13. The petition is authorized and the juvenile is release to _____ under the terms and conditions in item 17.	EVENT	Result Placement	AUT or PST M01, F01, GDN, CUS
<input type="checkbox"/> 14. The petition is authorized and the juvenile is temporarily placed with/detained at _____. Bond is set at _____.	EVENT	Result Placement Bond Amount	AUT or PST Any placement except those in line 13.
<input type="checkbox"/> 15. Release/Placement shall continue pending <input type="checkbox"/> resumption of the preliminary hearing <input type="checkbox"/> pre-trial <input type="checkbox"/> trial <input type="checkbox"/> disposition on _____.	EVENT	Next Hearing	PRH PT BT DSP
<input type="checkbox"/> 16. The juvenile shall be fingerprinted in accordance with the order for fingerprints (form MC233).			
NOTE: This line will always print.			
<input type="checkbox"/> 17. Other			
NOTE: Other orders will print here based on entries made in the results field on the Event Screen. If an entry is made in the "Next Hearing" field that is not one of those listed in item 15, the hearing will print here.			
Signature Line	EVENT	Date Jurist	

Approved, SCAO			
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px; vertical-align: top;"> ORDER AFTER PRELIMINARY HEARING/ INQUIRY, CHILD NOT REMOVED (CHILD PROTECTIVE PROCEEDINGS) </td> <td style="width: 50%; padding: 5px; vertical-align: top;"> CASE NO. PETITION NO. </td> </tr> </table>	ORDER AFTER PRELIMINARY HEARING/ INQUIRY, CHILD NOT REMOVED (CHILD PROTECTIVE PROCEEDINGS)	CASE NO. PETITION NO.
ORDER AFTER PRELIMINARY HEARING/ INQUIRY, CHILD NOT REMOVED (CHILD PROTECTIVE PROCEEDINGS)	CASE NO. PETITION NO.		
Court address	Court telephone no.		
<p>1. In the matter of (name(s), alias(es), DOB)</p> <p>2. Date of hearing: _____ Judge/Referee: _____ Bar no. _____</p> <p>THE COURT FINDS:</p> <p>3. The child <input type="checkbox"/> is <input type="checkbox"/> is not subject to continuing jurisdiction of another court. Court: _____</p> <p>4. A petition has been submitted alleging that the above child(ren) come(s) within the provisions of MCL 712A.2(b).</p> <p>5. <input type="checkbox"/> a. A preliminary inquiry has been made, and it is in the interests of the public or the child(ren) that further action <input type="checkbox"/> be taken and the petition be authorized. <input type="checkbox"/> not be taken.</p> <p><input type="checkbox"/> b. ¹A preliminary hearing was held. Notice of hearing was given as required by law.</p> <p>6. There <input type="checkbox"/> is <input type="checkbox"/> is not probable cause that one or more of the allegations in the petition are true.</p> <p><input type="checkbox"/> 7. The probable cause determination was waived by all parties present.</p> <p><input type="checkbox"/> 8. There is probable cause the <input type="checkbox"/> parent <input type="checkbox"/> guardian <input type="checkbox"/> legal custodian <input type="checkbox"/> other person residing in the child(ren)'s home abused the child(ren). Presence of the alleged abuser in the home <input type="checkbox"/> does <input type="checkbox"/> does not present a substantial risk of harm to the child(ren)'s life, physical health, or mental well being and he/she <input type="checkbox"/> should <input type="checkbox"/> should not be ordered out of the home. (Use form JC 65, Order Removing Alleged Abuser from Child's Home as appropriate)</p> <p>9. The conditions of custody in the home and with the individual with whom the child(ren) reside(s) are adequate to safeguard the child(ren) from the risk of harm to the child(ren)'s life, physical health, and mental well-being.</p> <p><input type="checkbox"/> 10. Parenting time with _____, even if supervised, may be harmful to the child(ren).</p> <p><input type="checkbox"/> 11. The child is a member of or eligible for membership in an American Indian tribe or band named _____ (complete and mail Form JC 48). Findings have been made on the record.</p> <p>IT IS ORDERED:</p> <p><input type="checkbox"/> 12. The petition is not authorized <input type="checkbox"/> and is dismissed. <input type="checkbox"/> and is referred to _____ _____ for alternate service. <input type="checkbox"/> pending continuation of the preliminary hearing.</p> <p><input type="checkbox"/> 13. The petition is authorized and the child(ren) are released to the custody of _____ under the terms and conditions in item 16. Name of parent, guardian, or legal custodian</p> <p><input type="checkbox"/> 14. Parenting time with _____ shall be as follows:</p> <p><input type="checkbox"/> 15. The child shall remain in the home pending <input type="checkbox"/> resumption of preliminary hearing <input type="checkbox"/> pre-trial <input type="checkbox"/> trial <input type="checkbox"/> disposition on _____ Date and time</p> <p><input type="checkbox"/> 16. Other:</p>			
Date _____	Judge _____		
<p>¹ Do not check this item if order is based on preliminary inquiry or investigation only. Note that preliminary hearings are mandatory in matters where a child is removed from his/her home.</p> <p>JC 11 (6/03) ORDER AFTER PRELIMINARY HEARING/INQUIRY, CHILD NOT REMOVED (CHILD PROTECTIVE PROCEEDINGS)</p> <p style="text-align: right;">MCL 712A.2, MCL 712A.11, MCL 712A.13a, MCR 3.962, MCR 3.965</p>			

**Order After Preliminary Hearing/Inquiry, Child Not Removed
(Child Protective Proceedings)
06/03 - JC11**

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 11 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date/Jurist	
THE COURT FINDS:			
3. <i>The child <input type="checkbox"/> is <input type="checkbox"/> is not subject to continuing jurisdiction of another court. Court:_____.</i> NOTE: This line will always print.			
4. <i>A petition has been submitted alleging that the above child(ren) come(s) within the provisions of MCL 712A.2(b).</i> NOTE: This line will always print.			
5. <input type="checkbox"/> a. <i>A preliminary inquiry has been made, and it is in the best interests of the public or the child(ren) that further action <input type="checkbox"/> be taken and the petition be authorized. <input type="checkbox"/> not be taken.</i> NOTE: This line will always print. <input type="checkbox"/> b. <i>1 A preliminary hearing was held. Notice of hearing was given as required by law.</i>	EVENT	Type	PRH
6. <i>There <input type="checkbox"/> is <input type="checkbox"/> is not probably cause that one or more of the allegations in the petition are true.</i> NOTE: "is not" will print unless "PCF" is entered in the results and then "is" will print.	EVENT	Result	PCF
<input type="checkbox"/> 7. <i>The probably cause determination was waived by all parties present.</i> NOTE: This line will always print.			
<input type="checkbox"/> 8. <i>There is probably cause the <input type="checkbox"/> parent <input type="checkbox"/> guardian <input type="checkbox"/> legal custodian <input type="checkbox"/> other person residing in the child(ren)'s home abused the child(ren). Presence of the alleged abuser in the home <input type="checkbox"/> does <input type="checkbox"/> does not present a substantial risk of harm to the child(ren)'s life, physical health, or mental well being and he/she <input type="checkbox"/> should <input type="checkbox"/> should not be ordered out of the home.</i> NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
9. <i>The conditions of custody in the home and with the individual with whom the child(ren) reside(s) are adequate to safeguard the child(ren) from the risk of harm to the child(ren)'s life, physical health, and mental well-being.</i> NOTE: This line will always print.			
<input type="checkbox"/> 10. <i>Parenting time _____, even if supervised, may be harmful to the child(ren).</i> NOTE: This line will always print.			
<input type="checkbox"/> 11. <i>The child is a member of or eligible for membership in an American Indian tribe or band named _____ (complete and mail form JC48). Findings have been made on the record.</i>	CASE	Race	AI
IT IS ORDERED: <input type="checkbox"/> 12. <i>The petition is not authorized <input type="checkbox"/> and is dismissed <input type="checkbox"/> and is referred to _____ for alternate service. <input type="checkbox"/> pending continuation of the preliminary hearing.</i>	EVENT	Result	NAP
<input type="checkbox"/> 13. <i>The petition is authorized and the child(ren) are released to the custody of _____ under the terms and conditions in item 16.</i> NOTE: "Does not" will print if any of the result codes are listed. Otherwise "Does" will print.	EVENT	Result Placement	AUT or PST M01, F01, GDN, CUS
<input type="checkbox"/> 14. <i>Parenting time with _____ shall be as follows:</i> NOTE: This line will always print.			
<input type="checkbox"/> 15. <i>The child shall remain in the home pending <input type="checkbox"/> resumption of preliminary hearing <input type="checkbox"/> pre-trial <input type="checkbox"/> trial <input type="checkbox"/> disposition on _____.</i>	EVENT	Next Hearing	PRH PT BT DSP
<input type="checkbox"/> 16. <i>Other:</i> NOTE: Other orders will print here based on entries made the results field of the Event Screen.			
Signature Line	EVENT	Date Jurist	

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER AFTER PRELIMINARY HEARING CHILD REMOVED FROM HOME (CHILD PROTECTIVE PROCEEDINGS), PAGE 1	CASE NO. PETITION NO.
Court address		Court telephone no.
<p>1. In the matter of (name(s), alias(es), DOB)</p> <p>2. Date of hearing: _____ Judge/Referee: _____ Bar no. _____</p> <p>THE COURT FINDS:</p> <p>3. The child <input type="checkbox"/> is <input type="checkbox"/> is not subject to continuing jurisdiction of another court. Court: _____</p> <p>4. A petition has been submitted alleging that the above child(ren) come(s) within the provisions of MCL 712A.2(b).</p> <p><input type="checkbox"/> 5. Notice of hearing was given as required by law.</p> <p><input type="checkbox"/> 6. There is good cause to adjourn the preliminary hearing. <input type="checkbox"/> Petitioner recommends removal of the child(ren) from the child(ren)'s home to assure the immediate safety of the child(ren).</p> <p><input type="checkbox"/> 7. The probable cause determination was waived by all parties present.</p> <p>8. There is probable cause that one or more of the allegations in the petition are true.</p> <p><input type="checkbox"/> 9. There is probable cause the <input type="checkbox"/> parent <input type="checkbox"/> guardian <input type="checkbox"/> legal custodian <input type="checkbox"/> other person residing in the child(ren)'s home abused the child(ren). Presence of the alleged abuser in the home <input type="checkbox"/> does <input type="checkbox"/> does not present a substantial risk of harm to the child(ren)'s life, physical health, or mental well being and he/she <input type="checkbox"/> should <input type="checkbox"/> should not be ordered out of the home. (Use form JC 65, Order Removing Alleged Abuser from Child's Home as appropriate)</p> <p>10. It is contrary to the welfare of the child(ren) to remain in the home <input type="checkbox"/> because _____ OR <input type="checkbox"/> because there is probable cause to believe the facts in the petition are true.</p> <p>11. <input type="checkbox"/> a. Based on <input type="checkbox"/> the following findings (attach list if more space is needed)</p>		
<p><input type="checkbox"/> the report _____ dated _____ <small>Identify type of report</small></p> <p><input type="checkbox"/> testimony of _____ backed up by written transcript <small>Name</small></p> <p>reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made prior to the placement of the child(ren) in foster care, to prevent or eliminate the need for removing the child(ren) from the child(ren)'s home and reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made to prevent the child(ren)'s removal from child(ren)'s home or to rectify the conditions that caused the child(ren)'s removal from the child(ren)'s home in accordance with MCL 712A.18f(4).</p> <p><input type="checkbox"/> b. Reasonable efforts to preserve and unify the family are not required because the parent subjected the child(ren) or another child of the parent to abuse including one or more of the types under MCL 712A.19b(k).</p>		
(SEE SECOND PAGE)		Do not write below this line - For court use only
JC 11a (6/03) ORDER AFTER PRELIMINARY HEARING, CHILD REMOVED FROM HOME (CHILD PROTECTIVE PROCEEDINGS), PAGE 1		MCL 712A.2, MCL 712A.11, MCL 712A.19b(4), MCL 712A.13a, MCL 712A.18f(4), MCR 3.962, MCR 3.965

**Order After Preliminary Hearing Child Removed From Home
(Child Protective Proceedings)
06/03 - JC11a**

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 11A in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
THE COURT FINDS:			
3. <i>The child <input type="checkbox"/> is <input type="checkbox"/> is not subject to continuing jurisdiction of another court. Court: _____.</i> NOTE: This line will always print.			
4. <i>A petition has been submitted alleging that the above child(ren) come(s) within the provisions of MCL 712A.2(b).</i> NOTE: This line will always print.			
<input type="checkbox"/> 5. <i>Notice of hearing was given as required by law.</i> NOTE: This line will always print.			
<input type="checkbox"/> 6. <i>There is good cause to adjourn the preliminary hearing. <input type="checkbox"/> Petitioner recommends immediate removal of the child(ren) from the child(ren)'s home to assure immediate safety of the child(ren)..</i> NOTE: This line will always print.			
7. <i>The probable cause determination was waived by all parties present.</i> NOTE: This line will always print.	EVENT	Result	PWA
8. <i>There is probable cause that one or more of the allegations in the petition are true.</i> NOTE: This line will always print.	EVENT	Result	PCF

Line From the Order Form	Screen	Field	Codes
<p><input type="checkbox"/> 9. <i>There is probable cause the <input type="checkbox"/> parent <input type="checkbox"/> guardian <input type="checkbox"/> legal custodian <input type="checkbox"/> other person residing in the child(ren)'s home abused the child(ren). Presence of the alleged abuser in the home <input type="checkbox"/> does <input type="checkbox"/> does not present a substantial risk of harm to the child(ren)'s life, physical health, or mental well being and he/she <input type="checkbox"/> should <input type="checkbox"/> should not be ordered out of the home (Use form JC65, Order Removing Alleged Abuser from Child's Home as appropriate)</i></p> <p>NOTE: This line will always print.</p>			
<p>10. <i>It is contrary to the welfare of the child(ren) to remain in the home <input type="checkbox"/> because _____ or <input type="checkbox"/> because there is probable cause to believe the facts in the petition are true.</i></p> <p>NOTE: This line will always print.</p>			
<p>11. <input type="checkbox"/> a. <i>Based on</i></p> <p><input type="checkbox"/> <i>the following findings (attach list if more space is needed)</i></p> <p><input type="checkbox"/> <i>the report _____ dated _____</i></p> <p><input type="checkbox"/> <i>testimony of _____ backed up by written transcript</i></p> <p><i>reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made prior to the placement of the child(ren) in foster care, to prevent or eliminate the need for removing the child(ren) from the child(ren)'s home and reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made to prevent the child(ren)'s removal from child(ren)'s home or to rectify the conditions that caused the child(ren)'s removal from the child(ren)'s home in accordance with MCL 712A.18f(4).</i></p> <p><input type="checkbox"/> b. <i>Reasonable efforts to preserve and unify the family are not required because the parent subjected the child(ren) or another child of the parent to abuse including one or more of the types under MCL 712A.19b(k)</i></p> <p>NOTE: This line will always print.</p>			

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 12. <i>Conditions of custody in the home and with the individual with whom the child(ren) reside(s) <input type="checkbox"/> are <input type="checkbox"/> are not adequate to safeguard the children from the risk of harm to the child(ren)'s life, physical health, and mental well-being.</i> <input type="checkbox"/> <i>No provision of service or other arrangement except removal of the child is reasonably available to adequately safeguard the child(ren) from the risk of harm to the child(ren)'s life, physical health, and mental well-being.</i> <input type="checkbox"/> <i>Conditions of custody at the placement away from the home and with the individual with whom the child(ren) is/are placed are adequate to safeguard the child(ren) from the risk of harm to the child(ren)'s life, physical health, and mental well-being.</i> NOTE: This line will always print.			
<input type="checkbox"/> 13. <i>Parenting time with _____, even if supervised, may be harmful to the child(ren).</i> NOTE: This line will always print.			
<input type="checkbox"/> 14. <i>A petition to terminate parental rights has been filed requiring automatic suspension of parenting time.</i> NOTE: This line will always print.			
<input type="checkbox"/> 15. <i>The child is a member of or eligible for membership in an American Indian tribe or band named _____ (complete and mail Form JC48). Findings have been made on the record.</i>	CASE	Race	AI

Line From the Order Form	Screen	Field	Codes
<p>IT IS ORDERED:</p> <p><input type="checkbox"/> 16. <i>The petition is authorized. The child(ren) are placed with _____.</i></p> <p><input type="checkbox"/> a. <i>The parent/guardian/legal custodian shall execute all documents necessary to release confidential information regarding the child(ren) including medical, mental, and educational reports. The parent/guardian/legal custodian of the child(ren), within 7 days, shall provide the supervising agency with the name and address of the medical providers for the child(ren). Any medical provider of the child(ren) shall release the medical records of the child(ren) to the supervising agency.</i></p> <p><input type="checkbox"/> b. <i>If the child(ren) are placed in the home of a relative, a home study shall be performed by the Family Independence Agency and a copy of the home study submitted to the court not more than 30 days after the placement.</i></p> <p><input type="checkbox"/> <i>Upon request, the Family Independence Agency shall release to the foster parent the information concerning the child(ren) in accordance with MCL 712A.13a(13).</i></p> <p>NOTE: This line will always print.</p>			
<p><input type="checkbox"/> 17. <i>Each child shall have <input type="checkbox"/> a psychological evaluation <input type="checkbox"/> counseling to determine appropriateness and conditions of parenting time.</i></p> <p>NOTE: This line will always print.</p>			
<p><input type="checkbox"/> 18. <i>Parenting time of _____ is as follows:</i></p> <p><input type="checkbox"/> frequent and unsupervised as approved by</p> <p><input type="checkbox"/> frequent and supervised by <i>the Family Independence Agency.</i></p> <p><input type="checkbox"/> <i>suspended while psychological evaluation or counseling is conducted and until ordered by the court.</i> <input type="checkbox"/> <i>suspended pending proceedings on the termination petition.</i></p> <p>NOTE: This line will always print.</p>			
<p><input type="checkbox"/> 19. <i>Parenting time of _____ is as follows:</i></p> <p><input type="checkbox"/> frequent and unsupervised as approved by</p> <p><input type="checkbox"/> frequent and supervised by <i>the Family Independence Agency.</i></p> <p><input type="checkbox"/> <i>suspended while psychological evaluation or counseling is conducted and until ordered by the court.</i> <input type="checkbox"/> <i>suspended pending proceedings on the termination petition.</i></p> <p>NOTE: This line will always print.</p>			

Line From the Order Form	Screen	Field	Codes
20. <i>Placement shall continue pending</i> <input type="checkbox"/> <i>resumption of the preliminary hearing</i> <input type="checkbox"/> <i>pre-trial</i> <input type="checkbox"/> <i>trial</i> <input type="checkbox"/> <i>disposition on _____.</i>	EVENT	Next Hearing	PRH PT BT DSP
21. <i>Reimbursement:</i> NOTE: This line will always print.			
<input type="checkbox"/> 22. <i>Other</i> NOTE: Other orders will print here based on entries made in the result field on the Event Screen.			
<i>Signature Line</i>	EVENT	Jurist	

Approved, SCAO																													
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	PROOF OF SERVICE/NON-SERVICE USE NOTE: This form is not to be used for proof of service of a summons or for publication	CASE NO. PETITION NO.																											
Court address _____ Court telephone no. _____																													
1. In the matter of _____ (name(s), alias(es), DOB) _____ Date of hearing: _____																													
2. I served _____ as follows:																													
<input type="checkbox"/> SERVICE BY MAIL On _____ I served the above papers, copies of which are either attached or were previously filed with the court, on the following person(s) by <input type="checkbox"/> ordinary <input type="checkbox"/> certified <input type="checkbox"/> registered mail, addressed to their last known address(es).																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">NAME</th> <th style="text-align: center;">ADDRESS</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	NAME	ADDRESS											<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">NAME</th> <th style="text-align: center;">PLACE OF SERVICE</th> <th style="text-align: center;">DATE AND TIME</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>		NAME	PLACE OF SERVICE	DATE AND TIME												
NAME	ADDRESS																												
NAME	PLACE OF SERVICE	DATE AND TIME																											
I declare that this proof of service by mail has been examined by me and that its contents are true to the best of my information, knowledge, and belief.																													
Date _____ Signature _____																													
<input type="checkbox"/> PERSONAL SERVICE Copies of the above papers were served personally by me on the following person(s):																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">NAME</th> <th style="text-align: center;">PLACE OF SERVICE</th> <th style="text-align: center;">DATE AND TIME</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>			NAME	PLACE OF SERVICE	DATE AND TIME																								
NAME	PLACE OF SERVICE	DATE AND TIME																											
I declare that this proof of personal service has been examined by me and that its contents are true to the best of my information, knowledge, and belief.																													
Date _____ Signature _____																													
<input type="checkbox"/> NON-SERVICE After diligent inquiry, I have been unable to find and serve the following person(s):																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">NAME</th> <th style="text-align: center;">REASON</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>			NAME	REASON																									
NAME	REASON																												
I declare that this proof of non-service has been examined by me and that its contents are true to the best of my information, knowledge, and belief.																													
Date _____ Signature _____																													
JC 12a (6/03) PROOF OF SERVICE/NON-SERVICE MCR 2.107(D), MCR 3.920(H)																													

Proof of Service/Non-Service 06/03 - JC12 (A or B)

This form can be generated from an event ADD or MOD screen. From the event screen, enter the date of the form and the event code of PSV - Proof of Service or PPS - Personal Proof of Service then enter 12 in the form number requested field.

Service by Mail

To generate a proof of service form indicating service by mail, an event must be added with an event type of "PSV". Enter 12 in the form number request field and then press <Enter>. The system will display the following screen.

PROOF OF SERVICE INFORMATION SHEET -- SERVICE BY MAIL

DESCRIBE PAPERS BEING SERVED: _____

SELECT TYPE OF MAIL SERVICE: ☐ ORDINARY ☐ CERTIFIED ☐ REGISTERED

ADDITIONAL PROFESSIONAL: _____

ENTER "X" TO SELECT PARTIES AND/OR THEIR ATTORNEYS:

"X"	SFX	PETITION	CODE	PARTY NAME	"X"	ATY/WKR	NAME
<input type="checkbox"/>	00	00000000		SMITH, AARON,	<input type="checkbox"/>	34306	AARDEMA
<input type="checkbox"/>	00	00000000	J01	TEST, JUVENILE,	<input type="checkbox"/>	96212	SMITH
<input type="checkbox"/>	00	00000000	GAL	BROWN, ANGIE,			NO ATTORNEY
<input type="checkbox"/>	00	00000000	INP	INTERESTED PARTY,,			NO ATTORNEY
<input type="checkbox"/>	00	00000000	PA2	CITY ATTORNEY,,			NO ATTORNEY

More...

F3=EXIT--NO PROCESSING ENTER=PROCESS REQUEST

MA b A 05/001

Connected to remote server/host OSMSOUTH using port 23 \\SCAO\IN54QLS on Ne05:

1. Type a description of the papers being served.
2. Place an "X" next to the type of mail service being used.
3. Place an "X" to the left of the name of the individuals that are being served with the described documents. The minor and minor's attorney are taken from the case screen. All other parties are taken from the party screen.
4. If an attorney or worker name is not listed on the proof of service, enter the bar number associated with that person in the additional professional fields.

Once all information has been entered on the screen, press <Enter> and the proof of service will generate and print.

Personal Proof of Service

To generate a personal proof of service form, an event must be added with an event type of “PPS”. Enter 12 in the form number request field and then press <Enter>. The system will display the following screen.

PROOF OF SERVICE INFORMATION SHEET -- PERSONAL SERVICE

DESCRIBE PAPERS BEING SERVED:

ADDITIONAL PROFESSIONAL: _____

ENTER "X" TO SELECT PARTIES AND/OR THEIR ATTORNEYS:

"X"	SFX	PETITION	CODE	PARTY NAME	"X"	ATY/WKR	NAME
—	00	00000000		SMITH, AARON,	—	34306	AARDEMA
—	00	00000000	J01	TEST, JUVENILE,	—	96212	SMITH
—	00	00000000	GAL	BROWN, ANGIE,			NO ATTORNEY
—	00	00000000	INP	INTERESTED PARTY,,			NO ATTORNEY
—	00	00000000	PA2	CITY ATTORNEY,,			NO ATTORNEY
							More...

F3=EXIT--NO PROCESSING ENTER=PROCESS REQUEST

MA b A 05/001

Connected to remote server/host OSMSOUTH using port 23 \\SCAO\IN54QLS on Ne05:

1. Type a description of the papers being served.
2. Place an “X” to the left of the name of the individuals that are being served with the described documents. The minor and minor’s attorney are taken from the case screen. All other parties are taken from the party screen.
3. If an attorney or worker name is not listed on the proof of service, enter the bar number associated with that person in the additional professional fields.

Once all information has been entered on the screen, press <Enter> and the proof of service will generate and print.

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	RECORD OF TRIAL/PLEA	CASE NO. PETITION NO.
Court address		Court telephone no.
1. In the matter of (name(s), alias(es), DOB)		
2. Date	3. Name <input type="checkbox"/> Judge <input type="checkbox"/> Referee	
PARTIES PRESENT		
4. Parent	8. Attorney	
5. Stepparent/Guardian/Legal custodian	9. Lawyer-guardian ad litem	
6. Minor	10. Victim/Other	
7. Petitioner	11. Other	
PROCEDURE/ADVICE OF RIGHTS (on reverse)		
SUMMARY		
12. Summary of findings and recommendations (summarize testimony if taken)		
FINDINGS AND RECOMMENDATIONS/ORDERS		
13. A <input type="checkbox"/> trial was conducted. <input type="checkbox"/> plea was knowingly, voluntarily, understandingly and accurately made as provided by the court rules and was accepted by the court. It appears the minor(s) <input type="checkbox"/> do(es) <input type="checkbox"/> do(es) not come within the provisions of the Juvenile Code. IT IS RECOMMENDED/ORDERED that: <input type="checkbox"/> 14. the petition be dismissed. <input type="checkbox"/> 15. the matter be adjourned for <input type="checkbox"/> dispositional hearing. <input type="checkbox"/> additional testimony. <input type="checkbox"/> 16. the next hearing is set for: <input type="checkbox"/> 17. other:		
Date	Judge/Referee	Bar no.

JC 13 (6/03) RECORD OF TRIAL/PLEA
MCL 712A.18(1), MCR 3.925(B), MCR 3.941, MCR 3.942, MCR 3.971, MCR 3.972

Record of Trial/Plea 06/03 - JC13

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 13 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date:</i> <i>Name:</i> <input type="checkbox"/> Judge <input type="checkbox"/> Referee	EVENT	Date Jurist	
<i>PARTIES PRESENT:</i> 4-11. <i>Parent, Stepparent/Guardian/Legal Custodian, Minor, Petitioner, Attorney, GAL, Other.</i> NOTE: This line will always print.			
<i>PROCEDURE/ADVISE OF RIGHTS (on reverse)</i> NOTE: This line will always print.			
<i>SUMMARY</i> 12. <i>Summary of findings and recommendations (summarize testimony if taken).</i> NOTE: This line will always print.			
<i>FINDINGS AND RECOMMENDATIONS/ORDERS</i> 13. <i>A <input type="checkbox"/> trial was conducted <input type="checkbox"/> plea was knowingly, vol- untarily, understandingly and accurately made as provided by the court. It appears the minor(s) <input type="checkbox"/> do(es) <input type="checkbox"/> do(es) not come within the provisions of the Juvenile Code and that:</i> NOTE: This line will always print.	EVENT EVENT	Type Result	BT or FJT AAL or PNC
<i>IT IS RECOMMENDED/ORDERED that:</i> <input type="checkbox"/> 14. <i>the petition be dismissed.</i>	PETITION	Adjud Code	PDM
<input type="checkbox"/> 15. <i>the matter be adjourned for</i> <input type="checkbox"/> <i>dispositional hearing</i> <input type="checkbox"/> <i>additional testimony</i> NOTE: This line will always print.			
<input type="checkbox"/> 16. <i>the next hearing is set for:</i>	EVENT	Next Hearing	Any Code
<input type="checkbox"/> 17. <i>Other:</i> NOTE: Other orders will print here depending on entries made to the results field of the event screen.			
Signature Line	EVENT	Jurist	

Approved, SCAO					
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY		ORDER OF DISPOSITION (DELINQUENCY PROCEEDINGS) PAGE 1		CASE NO. PETITION NO.	
Court address				Court telephone no.	
ORI MI- Police Report No.		CTN/TCN		SID	DOB
1. In the matter of (name(s), alias(es))					
2. Date of hearing: _____ Judge/Referee: _____ Bar no.					
3. Notice of hearing for the disposition was given as required by law.					
4. The juvenile has appeared in court in person with parent(s), guardian, legal custodian, guardian ad litem, and <input type="checkbox"/> had <input type="checkbox"/> waived an attorney.					
5. An adjudication was held and the court determined that the juvenile committed the following offense(s) and/or the following offense(s) have been dismissed:					
Count	ADJUDICATED BY Plea*	Court	Jury	DISMISSED BY*	CHARGE CODE(S) MCL Citation/PACC Code
*For plea: insert "A" for admission or "NC" for nolo contendere, For dismissal: insert "D" for dismissed by court or "NP" for dismissed by prosecutor/plaintiff.					
6. Specific findings of fact and law regarding this proceeding have been made on the record.					
<input type="checkbox"/> 7. HIV testing and sex offender registration is completed.					
<input type="checkbox"/> 8. The juvenile has been fingerprinted according to MCL 28.243.					
<input type="checkbox"/> 9. The offense adjudicated is abstractable to the Secretary of State (under MCL 257.625(20)(a), 257.732, 324.80131, 324.81134(12), 324.81135(7), 324.82157, or 333.7408a(12)). The juvenile's driver license number is: _____					
<input type="checkbox"/> 10. The licensing sanction is reportable to the State Police (under MCL 333.7408a(12) or 257.625(20)(b)). <input type="checkbox"/> Revoked. <input type="checkbox"/> Suspended _____ days. <input type="checkbox"/> Restricted _____ days.					
<input type="checkbox"/> 11. The juvenile must be placed in an institution outside Michigan. a. institutional care is in the best interests of the juvenile, b. equivalent facilities to meet the juvenile's needs are not available within Michigan, and c. the placement will not cause undue hardship.					
<input type="checkbox"/> 12. It is contrary to the welfare of the juvenile to remain in the home because _____ _____ _____					
(SEE SECOND PAGE)		Do not write below this line - For court use only			
Upon disposition of a juvenile offense as defined under MCL 28.241a(f), the clerk of the court shall send a copy of this order to the Michigan State Police Criminal Justice Information Center to create a criminal history record as required by MCL 712A.18(11). MCL 28.241a, MCL 600.2950h;600.2950m, MCL 712A.18, MCL 712A.20, MCL 764.15b, MCL 769.1f, JC 14 (6/03) ORDER OF DISPOSITION (DELINQUENCY PROCEEDINGS), PAGE 1 MCL 769.16a, MCR 3.936, MCR 3.943					

Order Of Disposition (Delinquency Proceedings) 06/03 - JC14

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 14 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
3. <i>Notice of hearing for the disposition was given as required by law.</i> NOTE: This line will always print.			
4. <i>The juvenile has appeared in court in person with parent(s), guardian, custodian, guardian ad litem, and <input type="checkbox"/> had <input type="checkbox"/> waived an attorney.</i>	EVENT	Attny	Bar Number
5. <i>An adjudication was held and the court deter- mined that the juvenile committed the following offense(s) and/or the following offense(s) have been dismissed.</i> <i>Count</i> ADJUDICATED BY <i>Plea</i> <i>Court</i> <i>Jury</i> DISMISSED BY* ALLEGATIONS CHARGE CODE(S) <i>MCL Citation/PACC code</i> NOTE: All other dismissal codes will print "D" for dis- missed by court. NOL will print "NP" for dismissed by prosecutor/plaintiff.	PETITION EVENT PETITION PETITION	Open Date Results Num Dis Dis Adjud Code Dis Comment ORIG/PACC AMMND/PACC	Any except PDM AAL, PNC All other codes JUR All Dismissal Codes MCL Codes
<input type="checkbox"/> 7. <i>HIV testing and sex offender registration is com- pleted.</i>	PETITION	ORIG/PACC AMMND/PACC	File Maintenance Charge file has a "X" at Juvenile Chr Flag field
<input type="checkbox"/> 8. <i>The juvenile has been fingerprinted according to MCL28.243.</i>	PETITION	ORIG/PACC AMMND/PACC	File Maintenance Charge file has a "X" at Juvenile Chr Flag field

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 9. <i>The offense adjudicated is abstractable to the Secretary of State (under MCL 257.625(20)(a), 257.732, 324.80131, 324.81134(12), 324.81135(7), 324.82157, or 333.7408a(12)). The juvenile's driver license number is: _____.</i>	PETITION CASE	ORIG/PACC AMMND/PACC DLN	File Maintenance Charge file has an "X" at the abstractable field.
<input type="checkbox"/> 10. <i>The licensing sanction is reportable to the State Police (under MCL 333.7408a(12) or 257.625(20)(b)).</i> <input type="checkbox"/> Revoked. <input type="checkbox"/> Suspended _____ days. <input type="checkbox"/> Restricted _____ days.	PETITION	ORIG/PACC AMMND/PACC	File Maintenance Charge file has an "X" at the abstractable field.
<input type="checkbox"/> 11. <i>The juvenile must be placed in an institution outside Michigan.</i> <i>a. institutional care is in the best interests of the juvenile.</i> <i>b. equivalent facilities to meet the juvenile's needs are not available within Michigan, and</i> <i>c. the placement will not cause undue hardship.</i> NOTE: This line will always print.			
<input type="checkbox"/> 12. <i>It is contrary to the welfare of the juvenile to remain in the home because _____.</i> NOTE: This line will always print.	EVENT	Attny	Bar Number
<input type="checkbox"/> 13. <i>Based on</i> <input type="checkbox"/> <i>the following findings (attach list if more space is needed)</i> <input type="checkbox"/> <i>the report _____ dated _____</i> <input type="checkbox"/> <i>testimony of _____ backed up by written transcript</i> <i>reasonable efforts</i> <input type="checkbox"/> <i>were</i> <input type="checkbox"/> <i>were not made</i> <i>prior to the placement of the juvenile in foster or other out-of-home care, to prevent or eliminate the need for removing the juvenile from his/her home.</i> NOTE: This line will always print.			
IT IS ORDERED: <input type="checkbox"/> 14. _____ <i>is warned and the petition is dismissed*</i>	CASE EVENT	Name Result	WAD
<input type="checkbox"/> 15. <i>The juvenile is placed in the temporary custody of this court and shall be placed with _____.</i> NOTE: <i>Placement type will be checked first if legal status is TWS, SSN or PWS.</i>	EVENT	Legal Status Placement Placement Type	TWC, PWC or CTS

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 16. <i>Other:</i> NOTE: Other orders will print here based on entries made to the results field of the event screen.			
17. <i>Juvenile shall pay:</i> <input type="checkbox"/> \$20.00 for Crime Victim Rights Fund <input type="checkbox"/> \$60.00 for DNA Sample <input type="checkbox"/> \$150.00 for forensic lab test. NOTE: This line will always print.			
<input type="checkbox"/> 18. <i>The review date is _____.</i>	EVENT	Next Hearing	
<input type="checkbox"/> 19. <i>The petition is dismissed.</i>	EVENT	Results	PDM
<i>Signature Line</i>	EVENT	Jurist	

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	MOTION AND AUTHORIZATION/DENIAL	CASE NO. PETITION NO.
Court address		Court telephone no.

1. In the matter of
(name(s), alias(es), DOB)

MOTION

2. The names and addresses of parents, guardians, or legal custodians are:

Father	Address
Mother	Address
Guardian/Legal custodian	Address

3. I request a ☐ transfer of this case to the formal calendar ☐ review. ☐ rehearing. ☐ adjournment.
☐ hearing regarding the agency's notice of intent to return the child home.
☐ review the initial services plan and/or custody or placement order.
 State reasons below as appropriate

I declare that this motion has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Signature _____ Date _____ Agency/Address _____

Name (type or print) _____ City, state, and zip _____ Telephone no. _____

AUTHORIZATION/DENIAL

☐ 4. Transfer is authorized and hearing on the petition of _____ is set for
 Date _____ at _____ m. at _____
 Date _____ Time _____ Location _____

☐ 5. ☐ Review ☐ Rehearing ☐ Adjournment ☐ Hearing on agency's intent to return child home is authorized and
 hearing is set for _____ at _____ m. at _____
 Date _____ Time _____ Location _____

☐ 6. ☐ Transfer ☐ Review ☐ Rehearing ☐ Adjournment is denied.

Date _____ Judge/Referee _____ Bar no. _____

Do not write below this line - For court use only

MCL 712A.13a(12), MCL 712A.17, MCL 712A.18d, MCL 712A.19(10), MCL 712A.21,
 MCR 3.923(G), MCR 3.932(C)(8), MCR 3.942(A), MCR 3.945(A), MCR 3.966,
 MCR 3.972(A), MCR 3.975(H), MCR 3.992(A)

JC 15 (6/03) MOTION AND AUTHORIZATION / DENIAL

Motion and Authorization/Denial

06/03 - JC15

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 15 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. MOTION <i>The names and addresses of parents, guardians, or custodians are:</i> <i>Father</i> <i>Mother</i> <i>Guardian</i>	PARTY PARTY PARTY	Address Address Address	F01 M01 GDN or CUS
3. <i>I request a <input type="checkbox"/> transfer of this case to the formal calendar <input type="checkbox"/> review <input type="checkbox"/> rehearing <input type="checkbox"/> adjournment <input type="checkbox"/> hearing regarding the agency's notice of intent to return the child home. <input type="checkbox"/> review the initial services plan and/or custody or placement order.</i> NOTE: This line will always print.			
<i>I declare that this motion has been examined by me and that its contents are true to the best of my information, knowledge, and belief.</i> <i>Signature Line</i> NOTE: This line will always print.			
AUTHORIZATION/DENIAL <input type="checkbox"/> 4. <i>Transfer is authorized and hearing on the petition of _____ is set for _____ at _____.</i> NOTE: This line will always print.			
<input type="checkbox"/> 5. <input type="checkbox"/> Review <input type="checkbox"/> Rehearing <input type="checkbox"/> Adjournment <input type="checkbox"/> Hearing on agency's intent to return child home is authorized and hearing is set for _____ at ____.	EVENT	Next Hearing	RVH, REH or ADJ
<input type="checkbox"/> 6. <input type="checkbox"/> Transfer <input type="checkbox"/> Review <input type="checkbox"/> Rehearing <input type="checkbox"/> Adjournment is denied. NOTE: This line will always print.			
<i>Signature Line</i>	EVENT	Jurist	

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER OF DISPOSITION, CHILD IN HOME (CHILD PROTECTIVE PROCEEDINGS)	CASE NO. PETITION NO.
Court address _____ Court telephone no. _____		
1. In the matter of (name(s), alias(es), DOB) _____		
2. Date of hearing: _____ Judge/Referee: _____ Bar no. _____		
3. An adjudication was held and one or more of the statutory grounds alleged in the petition are true.		
4. Notice of hearing for the disposition was given as required by law.		
5. The court has considered the case service plan and other evidence presented. Specific findings of fact and law regarding this proceeding have been made on the record.		
THE COURT FINDS:		
<input type="checkbox"/> 6. Parenting time by _____, even if supervised, would be harmful to the child(ren). <small>Identify person(s)</small>		
IT IS ORDERED:		
<input type="checkbox"/> 7. _____ is warned and the jurisdiction of the court is terminated. <small>Name (type or print)</small>		
<input type="checkbox"/> 8. The child(ren) are in the temporary custody of this court and shall remain at home/be returned home to the care of _____ under the supervision of the <input type="checkbox"/> court. <small>Name of parent/guardian/legal custodian</small> <input type="checkbox"/> Michigan Family Independence Agency.		
<input type="checkbox"/> 9. The parent(s)/guardian/legal custodian shall comply with the case service plan dated _____ <input type="checkbox"/> as modified at the hearing. <input type="checkbox"/> and additionally shall:		
<input type="checkbox"/> 10. Parenting time is denied to _____. <small>Identify person(s)</small>		
<input type="checkbox"/> 11. Parenting time is granted to _____ subject to the following conditions: <small>Identify person(s)</small>		
<input type="checkbox"/> 12. The petition is dismissed and the jurisdiction of this court is terminated except that the court reserves the right to enforce payments of reimbursement that have been accrued up to and including the date of this order.		
<input type="checkbox"/> 13. Other: Include reimbursement provisions as required by MCL 712A.18(2)		
14. Notice: Reviews shall be held as follows:		
<input type="checkbox"/> Progress review (without hearing) shall be held on _____ at _____. <small>Date Time</small>		
<input type="checkbox"/> Dispositional review hearing shall be held on _____ at _____. <small>Date Time</small>		
Date _____ Judge _____		
MCL 712A.18, MCL 712A.18f, MCL 712A.20, MCR 3.973(F)		
JC 17 (6/03) ORDER OF DISPOSITION, CHILD IN HOME (CHILD PROTECTIVE PROCEEDINGS)		

**Order Of Disposition
(Child Protective Proceedings)
06/03 - JC17**

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 17 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
3. <i>An adjudication was held and one or more of the statutory grounds alleged in the petition are true.</i> NOTE: This line will always print.			
4. <i>Notice of Hearing for the disposition was given as required by law.</i> NOTE: This line will always print.	EVENT	Attny	Bar Number
5. <i>The court has considered the case service plan and other evidence presented. Specific findings of fact and law regarding this proceeding have been made on the record.</i> NOTE: This line will always print.			
THE COURT FINDS: <input type="checkbox"/> 6. <i>Parenting time by _____, even if supervised, would be harmful to the child(ren).</i> NOTE: This line will always print.			
IT IS ORDERED: <input type="checkbox"/> 7. <i>_____ is warned and the jurisdiction of the court is terminated.</i>	EVENT	Result	WAD
<input type="checkbox"/> 8. <i>The child(ren) are in the temporary custody of this court and shall remain at home/be returned home to the care of _____ under the supervision of the _____ court <input type="checkbox"/> Michigan Family Independence Agency.</i>	EVENT	Result Placement Placement Type	PTC Any relative place PHP, PHR, PLC, PHD, PLD, PRD
<input type="checkbox"/> 9. <i>The parent(s)/guardian/legal custodian shall comply with the case service plan dated _____. <input type="checkbox"/> as modified at the hearing <input type="checkbox"/> and additionally shall:</i>	EVENT	Previous Event for this petition with a previous date	DCR or ISP

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 10. <i>Parenting time is denied to _____.</i> NOTE: This line will always print.			
<input type="checkbox"/> 11. <i>Parenting time is granted to _____ subject to the following conditions:</i> NOTE: This line will always print.			
<input type="checkbox"/> 12. <i>An adjudication was held and the child(ren) were found to come under the jurisdiction of the court.</i> NOTE: This line will always print.			
<input type="checkbox"/> 13. <i>Other:</i> NOTE: Other orders will print here based on entries made to the result field of the event screen.			
14. Notice: <i>Reviews shall be held as follows:</i> <input type="checkbox"/> <i>Progress review (without hearing) shall be held on _____ at _____.</i> <input type="checkbox"/> <i>Dispositional review hearing shall be held on _____ at _____.</i> NOTE: This line will always print.			
<i>Signature Line</i>	EVENT	Jurist	

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	SUPPLEMENTAL ORDER OF DISPOSITION FOLLOWING REVIEW HEARING (CHILD PROTECTIVE PROCEEDINGS) PAGE 1	CASE NO. PETITION NO.
Court address _____ Court telephone no. _____		
1. In the matter of (name(s), alias(es), DOB)		
2. Date of hearing: _____ Judge/Referee: _____ Bar no. _____		
3. As of the last order, dated _____, the above named child(ren) were placed with _____ _____, in the temporary custody of the court.		
4. Notice of hearing for the review was served as required by law.		
5. The court has considered the case service plan and other evidence presented. Specific findings of fact and law regarding this proceeding have been made on the record. (See other side for a list of specific conditions which must be reviewed on the record.)		
THE COURT FINDS:		
<input type="checkbox"/> 6. It is contrary to the welfare of the child(ren) to remain in the home because _____ _____		
<input type="checkbox"/> 7. Based on <input type="checkbox"/> the following findings (attach list if more space is needed)		
<input type="checkbox"/> the report _____ dated _____ <small>Identify type of report</small>		
<input type="checkbox"/> testimony of _____ backed up by written transcript <small>Name</small>		
reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made prior to the placement of the child(ren) in foster care, to prevent or eliminate the need for removing the child(ren) from the child(ren)'s home and reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made to prevent the child(ren)'s removal from child(ren)'s home or to rectify the conditions that caused the child(ren)'s removal from the child(ren)'s home in accordance with MCL 712A.18f(4).		
<input type="checkbox"/> 8. Progress toward alleviating or mitigating the conditions that caused the child(ren) to be placed or to remain in temporary foster care <input type="checkbox"/> was <input type="checkbox"/> was not made in accordance with MCL 712A.19(7).		
9. The child(ren)'s continued placement <input type="checkbox"/> is <input type="checkbox"/> is not necessary and appropriate.		
<input type="checkbox"/> 10. The permanency plan is _____. Reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made to place the child(ren) in a timely manner in accordance with the permanency plan and to complete whatever steps are necessary to finalize the permanent placement of the child(ren).*		
<input type="checkbox"/> 11. Parenting time with _____, even if supervised, may be harmful to the child(ren).		
<input type="checkbox"/> 12. A petition to terminate parental rights was filed, requiring automatic suspension of parenting time.		
NOTE: Contrary to the welfare and reasonable efforts findings only need to be made if the findings had not already been made at a prior hearing and this is the first time the child has been removed from the home. *These reasonable efforts findings must be made within 12 months from when the child entered foster care and every 12 months afterward to preserve IV-E funding.		
(SEE SECOND PAGE)		
Do not write below this line - For court use only		
JC 19 (6/03) SUPPLEMENTAL ORDER OF DISPOSITION FOLLOWING REVIEW (CHILD PROTECTIVE PROCEEDINGS), PAGE 1		
MCL 712A.18f(4), MCL 712A.19, MCL 712A.20, MCR 3.974(A)(3), MCR 3.975, MCR 3.978		

Supplemental Order Of Disposition Following Review Hearing (Child Protective Proceedings) 06/03 - JC19

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 19 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
3. <i>As of the last order, dated _____, the above named child(ren) were placed with _____, in the temporary custody of the court.</i>	EVENT	Type and Date (Prior)	Any event code with HRG attribute
4. <i>Notice of Hearing for the review was given as required by law.</i> <i>NOTE: This line will always print.</i>			
5. <i>The court has considered the case service plan and other evidence presented. Specific findings of fact and law regarding this proceeding have been made on the record.</i> <i>NOTE: This line will always print.</i>			
THE COURT FINDS: <input type="checkbox"/> 6. <i>It is contrary to the welfare of the child(ren) to remain in the home because _____.</i> <i>NOTE: This line will always print.</i>			
<input type="checkbox"/> 7. <i>Based on</i> <input type="checkbox"/> <i>the following findings</i> <input type="checkbox"/> <i>the report _____ dated _____</i> <input type="checkbox"/> <i>testimony of _____ backed up by written transcript</i> <i>reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made</i> <i>prior to the placement of the child(ren) in foster</i> <i>care, to prevent or eliminate the need for remov-</i> <i>ing the child(ren) from the child(ren)'s home and</i> <i>reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made to</i> <i>prevent the child(ren)'s removal from the</i> <i>child(ren)'s home or to rectify the conditions that</i> <i>caused the child(ren)'s removal from the</i> <i>child(ren)'s home in accordance with</i> <i>MCL712A.18f(4).</i> <i>NOTE: This line will always print.</i>			

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 8. <i>Progress toward alleviating or mitigating the conditions that caused the child(ren) to be placed or to remain in temporary foster care</i> <input type="checkbox"/> was <input type="checkbox"/> was not made in accordance with MCL712A.19(7). NOTE: This line will always print.			
9. <i>The child(ren)'s continued placement</i> <input type="checkbox"/> is <input type="checkbox"/> is not necessary and appropriate. NOTE: This line will always print.			
<input type="checkbox"/> 10. <i>The permanency plan is _____. Reasonable efforts</i> <input type="checkbox"/> were <input type="checkbox"/> were not made to place the child(ren) in a timely manner in accordance with the permanency plan and to complete whatever steps are necessary to finalize the permanent placement of the child(ren).* NOTE: This line will always print.			
<input type="checkbox"/> 11. <i>Parenting time with _____, even if supervised, may be harmful to the child(ren).</i> NOTE: This line will always print.			
<input type="checkbox"/> 12. <i>A petition to terminate parental rights was filed, requiring automatic suspension of parenting time.</i> NOTE: This line will always print.			
IT IS ORDERED: <input type="checkbox"/> 13. <i>Jurisdiction of this court is terminated in this case except that the court reserves the right to enforce payments of reimbursement that have accrued up to and including the date of this order.</i> NOTE: This line will always print.	EVENT	Results	WTM or CSD

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 14. <i>The child(ren) are continued in the temporary custody of this court and placement with _____ <input type="checkbox"/> continues. <input type="checkbox"/> is changed to ____.</i>	EVENT	Placement Placement Type	Any Placement Type
<input type="checkbox"/> 15. <i>The parents/guardian/legal custodian shall comply with the case service plan dated _____ <input type="checkbox"/> as modified at the hearing. <input type="checkbox"/> and additionally shall:</i>	EVENT	Result	PSP
<input type="checkbox"/> 16. <i>Parenting time of _____ is as follows:</i> <input type="checkbox"/> <i>frequent and unsupervised as approved by</i> <input type="checkbox"/> <i>frequent and supervised by the Family Independence Agency.</i> <input type="checkbox"/> <i>suspended while psychological evaluation or counseling is conducted and until ordered by the court.</i> <input type="checkbox"/> <i>suspended pending proceedings on the termination process</i> NOTE: This line will always print.			
<input type="checkbox"/> 17. <i>Parenting time of _____ is as follows:</i> <input type="checkbox"/> <i>frequent and unsupervised as approved by</i> <input type="checkbox"/> <i>frequent and supervised by the Family Independence Agency.</i> <input type="checkbox"/> <i>suspended while psychological evaluation or counseling is conducted and until ordered by the court.</i> <input type="checkbox"/> <i>suspended pending proceedings on the termination process</i> NOTE: This line will always print.			
18. <i>Previous reimbursement orders shall continue.</i> NOTE: This line will always print.			
<input type="checkbox"/> 19. <i>Other:</i> NOTE: Other orders will print here based on entries made to the results field of the event screen.			
<input type="checkbox"/> 20. Notice of Hearing: <i>Review hearings shall be held as follows:</i> <input type="checkbox"/> <i>**a foster family agreement or permanent relative placement has been approved - See MCL 712A.19(4).</i> <input type="checkbox"/> <i>91 day review</i> <input type="checkbox"/> <i>182 day review**</i> <input type="checkbox"/> <i>permanency planning hearing</i> <input type="checkbox"/> <i>other review</i> <input type="checkbox"/> <i>The court recommends placement with ____.</i>	EVENT	Next Hearing	SRE DRH/PRN PPH Any other hearing
Signature Line	EVENT	Jurist	

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	SUMMONS: ORDER TO APPEAR (DELINQUENCY PROCEEDINGS) / (PERSONAL PROTECTION PROCEEDINGS)	CASE NO. PETITION NO.
Court address		Court telephone no.
1. In the matter of (name(s), alias(es), DOB)		Police Report No.
2. TO: <div style="display: inline-block; width: 150px; height: 40px; border: 1px solid black; vertical-align: middle;"></div>		
3. YOU AND THE JUVENILE ARE ORDERED to appear in person before the court for a hearing on the allegations in the attached petition(s).		
4. The date, time, and place of the hearing are:		
5. The purpose of the hearing is:		
<input type="checkbox"/> to decide, at a trial, whether the juvenile is guilty or not guilty of the offense(s) in the petition; <input type="checkbox"/> to decide whether the juvenile has violated probation; <input type="checkbox"/> to decide whether the court will waive jurisdiction over the juvenile so the state may try the juvenile on a felony charge as though an adult. <input type="checkbox"/> to decide whether the juvenile should be found in contempt of court for violating a minor personal protection order. <input type="checkbox"/> other:		
6. RIGHT TO ATTORNEY: The juvenile has the right to be represented by an attorney. If the juvenile wants an attorney, you should hire one immediately so the attorney will be ready on the hearing date. If you or those responsible for the juvenile's support are not financially able to or refuse to provide an attorney, the court should be contacted immediately about a court appointed attorney.		
7. RIGHT TO TRIAL BY JURY: If the juvenile wants a jury to decide the facts at the trial, you must file a written request with the court within 14 days after the court gives notice of the right to jury trial or 14 days after an appearance by an attorney, whichever is later, but no later than 21 days before trial.		
8. RIGHT TO TRIAL BY JUDGE: Either a judge or a referee may decide the facts at a trial without a jury. If the juvenile wants a judge to decide the facts at the trial, you must file a written request with the court within 14 days after the court gives notice of the right to a judge or 14 days after an appearance by an attorney, whichever is later, but no later than 21 days before trial.		
9. PROBATION VIOLATION HEARING/MINOR PERSONAL PROTECTION ORDER VIOLATION HEARING: The juvenile may be represented by an attorney, may remain silent, may confront and cross-examine witnesses against him/her, and may present witnesses in his/her favor although the juvenile is not entitled to a jury at the hearing.		
If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter, please contact the court immediately to make arrangements.		
FAILURE TO APPEAR may subject you to the penalty for contempt of court, and a bench warrant may be issued for your apprehension.		
Date	Judge	Bar no.
Do not write below this line - For court use only		
JC 20 (6/03) SUMMONS: ORDER TO APPEAR (DELINQUENCY PROCEEDINGS)/(PERSONAL PROTECTION PROCEEDINGS) MCL 712A.13, MCR 3.911, MCR 3.912, MCR 3.915, MCR 3.920, MCR 3.944, MCR 3.983(B)		

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	SUMMONS: ORDER TO APPEAR (CHILD PROTECTIVE PROCEEDINGS)	CASE NO. PETITION NO.
Court address		Court telephone no.
<p>1. In the matter of (name(s), alias(es), DOB)</p> <p>2. TO: </p> <p style="text-align: center;"></p> <p>3. YOU ARE ORDERED to appear in person before the court for a hearing on the allegations in the attached petition. The above named child(ren)'s appearance <input type="checkbox"/> is <input type="checkbox"/> is not necessary.</p> <p>4. The date, time, and place of the hearing are:</p> <p>5. The purpose of the hearing is:</p> <p><input type="checkbox"/> to decide, at a trial, whether one or more of the statutory grounds alleged in the petition are true.</p> <p><input type="checkbox"/> to rule on a request that your parental rights over the child(ren) be terminated.</p> <p><input type="checkbox"/> to decide if you are the father of the above named child(ren).</p> <p><input type="checkbox"/> other:</p> <p>6. RIGHT TO ATTORNEY: As a respondent you have the right to be represented by an attorney. If you want an attorney, you should hire one immediately so the attorney will be ready on the hearing date. If you want an attorney but are not financially able to hire an attorney, you should contact the court immediately about a court appointed attorney.</p> <p>7. RIGHT TO TRIAL BY JURY: If you want a jury to decide the facts at the trial, you must file a written request with the court within 14 days after the court gives notice of the right to jury trial or 14 days after an appearance by an attorney, whichever is later, but no later than 21 days before trial. There is no right to a jury at a termination of parental rights hearing.</p> <p>8. RIGHT TO TRIAL BY JUDGE: Either a judge or a referee may decide the facts at a trial without a jury. If you want a judge to decide the facts at the trial, you must file a written request with the court within 14 days after the court gives notice of the right to a judge or 14 days after an appearance by an attorney, whichever is later, but no later than 21 days before trial.</p> <p>If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter, please contact the court immediately to make arrangements.</p> <div style="border: 1px solid black; padding: 10px; text-align: center; margin: 10px auto; width: 60%;"> <p>WARNING: You are notified that this hearing may result in a temporary or permanent loss of your rights to the child(ren).</p> </div> <p>FAILURE TO APPEAR may subject you to the penalty for contempt of court, and a bench warrant may be issued for your arrest.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%;">Date _____</div> <div style="width: 40%;">Judge _____</div> <div style="width: 30%;">Bar no. _____</div> </div> <div style="border: 1px solid black; height: 100px; margin-top: 10px; position: relative;"> <div style="position: absolute; top: 5px; right: 5px; text-align: center;">Do not write below this line - For court use only</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 60%;">JC 21 (6/03) SUMMONS: ORDER TO APPEAR (CHILD PROTECTIVE PROCEEDINGS)</div> <div style="width: 35%; text-align: right;"> <p>MCL 712A.13, MCR 3.911, MCR 3.912, MCR 3.915, MCR 3.920</p> </div> </div>		

Summons: Order to Appear 06/03 - JC20 & JC21

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 20 or 21 in the form number request field at the bottom of the screen and press <Enter>.

The following screen will be displayed.

FORMS GENERATION INFORMATION SHEET

ADDITIONAL PROFESSIONAL: _____

ENTER "X" TO SELECT PARTIES AND/OR THEIR ATTORNEYS:

"X"	SFX	PETITION	CODE	PARTY NAME	"X"	ATY/WKR	NAME
<input type="checkbox"/>	02	00000000		TEST NAME 123,,	<input type="checkbox"/>		NO ATTORNEY
<input type="checkbox"/>	01	00000000	F01	TESTFATHER,,	<input type="checkbox"/>		NO WORKER
<input type="checkbox"/>	01	00000002	V01	TEST VICTIME,,	<input type="checkbox"/>		NO ATTORNEY
<input type="checkbox"/>	02	00000000	CMP	TEST,123,	<input type="checkbox"/>		NO ATTORNEY
<input type="checkbox"/>	02	00000001	V02	ROMANTIC,,	<input type="checkbox"/>		NO ATTORNEY

Bottom

ENTER "X" FOR PROOF OF SERVICE: ☒

F3=EXIT--NO PROCESSING ENTER=PROCESS REQUEST

MB b 05/026

1902 - Session successfully started \\SCAO\1N54QLS on Ne05:

1. Enter additional professional numbers.
2. Place an "X" next to the names of the individuals that will be included in the summons.
3. Place an "x" in the appropriate field for the proof of service. The choices are personal service or service by mail.

Once all information has been entered on the screen, press <Enter>. The system will display the following screen.

Petition # 08537981 Police Complaint #

4. The date, time and place of the hearing are: 7/15/03 at 1200pm
COURTROOM A
RM A COURTHOUSE 123 MAIN
LANSING MI 48999

5. The purpose of the hearing is:
{ } to decide, at a(n) PRELIMINARY HEARING
whether the court should exercise authority over the child because
of neglect or abuse;
{ } to rule on a request that your parental rights over the child be
terminated;
{ } to decide if you are the father of the above named child;
{ } other:

F3 = EXIT PRESS ENTER TO PRINT

MA b A 01/002
Connected to remote server/host OSMSOUTH using port 23 \\SCAO\1N54QLS on Ne05:

Check the screen for errors and enter any additional information that you would like to have appear on the summons.

Press <Enter> after all changes have been made and the system will generate the summons.

NOTE: If you "X" either proof of service option, the system will take you through generating a proof of service. Please see JC12 for instructions on generating this.

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY		CASE NO.
1. In the matter of		
JC 22 (9/97)		

Blank Order Form 09/97 - JC22

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 22 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
<i>Body of Order</i>	EVENT	Results Programs Next Hearing Line Bond Curfew	
<i>Signature Line</i>	EVENT	Jurist	

Approved, SCAO	
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	CASE NO. PETITION NO.
WAIVER OF NOTICE OF SUMMONS/HEARING	
Court address	Court telephone no.

1. In the matter of _____
 (name(s), alias(es), DOB)

2. A hearing is scheduled for _____ at _____ m. regarding
 Date Time

3. I have received a copy of the petition for the above scheduled hearing.

4. I understand that this hearing may result in a ☐ temporary ☐ permanent loss of my rights to the minor(s).

5. I understand that:
 - a. In alleged juvenile delinquency cases, the juvenile has the right to remain silent and is not obligated to testify.
 - b. The juvenile has a right to a court appointed attorney if the juvenile and those responsible for his/her support are financially unable, or refuse, to provide an attorney.
 - c. The respondent(s), if charged with an offense against the child, have the right to a court appointed attorney if they are financially unable to hire an attorney.
 - d. I have the right to bring witnesses on my behalf and confront and examine those testifying against me.
 - e. I have the right to a jury at trial only. If I want a jury trial, I must file a request in writing with the court within: 1) 14 days after the court gives notice of the right to jury trial, or 2) 14 days after an appearance by an attorney, whichever is later, but no later than 21 days before trial.

6. I acknowledge this notice and my right to receive a summons or written notice of hearing.
 I waive ☐ service of a summons. ☐ further legal notice of this hearing.

Date

Juvenile's signature

Address

City, state, zip

Mother's signature

Address

City, state, zip

Father's signature

Address

City, state, zip

Signature

Address

City, state, zip

Do not write below this line - For court use only

JC 23 (6/03) WAIVER OF NOTICE OF SUMMONS/HEARING
MCR 3.911, MCR 3.920(E)

Waiver of Notice of Hearing 06/03 - JC23

This form can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 23 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>A hearing is scheduled for _____ at _____ regarding _____.</i>	EVENT	Type (Prior) Jurist	NOH
<i>Line 3 - 6 will always print.</i>			
<i>Signature Line</i> NOTE: This line will always print.			

Approved, SCAO			
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER OF DISPOSITION COMMITMENT OR REFERRAL TO FAMILY INDEPENDENCE AGENCY (DELINQUENCY PROCEEDINGS), PAGE 1	CASE NO. PETITION NO.	
Court address		Court telephone no.	
ORI MI- Police Report No. 1. In the matter of (name(s), alias(es))	CTN/TCN	SID	DOB
2. Date of hearing: _____ Judge/Referee: _____ 3. Notice of hearing for the disposition was given as required by law. Bar no. 4. The juvenile has appeared in court in person with parent(s), guardian, legal custodian, guardian ad litem, and <input type="checkbox"/> had <input type="checkbox"/> waived an attorney. 5. An adjudication was held and the court determined that the juvenile committed the following offense(s) and/or the following offense(s) have been dismissed:			
Count	ADJUDICATED BY Plea*	Court	Jury
DISMISSED BY*	ALLEGATIONS		CHARGE CODE(S) MCL Citation/PACC Code

*For plea: insert "A" for admission or "NC" for nolo contendere. For dismissal; insert "D" for dismissed by court or "NP" for dismissed by prosecutor/plaintiff.

6. Specific findings of fact and law regarding this proceeding have been made on the record.
☐ 7. HIV testing and sex offender registration is completed.
☐ 8. The juvenile has been fingerprinted according to MCL 28.243.
☐ 9. The offense adjudicated is abstractable to the Secretary of State (under 257.625(20)(a), 257.732, 324.80131, 324.81134(12), 324.81135(7), 324.82157, or 333.7408a(11)), The juvenile's driver license number is: _____
☐ 10. The licensing sanction is reportable to the State Police (under MCL 333.7408a(11) or 257.625(20)(b)).
 ☐ Revoked. ☐ Suspended _____ days. ☐ Restricted _____ days.

THE COURT FINDS:
☐ 11. It is contrary to the welfare of the juvenile to remain in the home _____

☐ 12. Based on
 ☐ the following findings (attach list if more space is needed)

☐ the report _____ dated _____
 Identify type of report

☐ testimony of _____ backed up by written transcript
 Name

NOTE: If the juvenile had been previously removed from the home, was then returned to the home, and is being removed again through this order, contrary to the welfare and reasonable efforts findings must be made even though the findings had been made at a prior hearing.

Do not write below this line - For court use only

(SEE SECOND PAGE)

Upon disposition of a juvenile offense as defined under MCL 28.241a(f), the clerk of the court shall send a copy of this order to the Michigan State Police Criminal Justice Information Center to create a criminal history record as required by MCL 712A.18(11).

MCL 400.55(h), MCL 712A.18, MCL 712A.20, MCL 712A.24, MCL 803.301, MCR 3.936, MCR 3.943

JC 25 (6/03) ORDER OF DISPOSITION, COMMITMENT OR REFERRAL TO FAMILY INDEPENDENCE AGENCY
 (DELINQUENCY PROCEEDINGS), PAGE 1

**Order of Disposition Commitment or Referral
To Family Independence Agency
(Delinquency Proceedings)
06/03 - JC25**

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 25 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
3. <i>Notice of hearing for the disposition was given as required by law.</i>			
NOTE: This line will always print.			
4. <i>The juvenile has appeared in court in person with parent(s), guardian, legal custodian, guardian ad litem, and/or <input type="checkbox"/> had <input type="checkbox"/> waived an attorney.</i>	EVENT	Attny	
5. <i>An adjudication was held and the court deter- mined that the juvenile committed the following offense(s) and/or the following offense(s) have been dismissed:</i>	PETITION EVENT	Open Date Results	Any except PDM
Count	PETITION	Num	
ADJUDICATED BY			AAL, PNC
Plea		Dis	All other codes
Court		Dis	JUR
Jury		Adjud Code	
DISMISSED BY*	PETITION	Dis	Any Dismissal Code
ALLEGATIONS		Comment	
CHARGE CODE(S)		ORIG/PACC	MCL Codes
<i>MCL Citation/PACC code</i>		AMMND/PACC	
NOTE: If "NOL" is found in the Dis field, "NP" will print for dismissed by prosecutor/plaintiff. All other dismissal codes in the Dis field will print "D" for dismissed by court.			
6. <i>Specific findings of fact and law regarding this proceeding have been made on the record.</i>			
NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 7. <i>HIV testing and sex offender registration is completed..</i>	PETITION	ORIG PACC AMMND PACC	File Maintenance Charge file has a "X" at Juvenile Chr Flag field
<input type="checkbox"/> 8 <i>The juvenile has been fingerprinted according to MCL 28.243.</i>	PETITION	ORIG PACC AMMND PACC	File Maintenance Charge file has a "X" at Juvenile Chr Flag field
<input type="checkbox"/> 9. <i>The offense adjudicated is abstractable to the Secretary of State, The juvenile's driver license number is: _____.</i>	PETITION CASE	ORIG PACC AMMND PACC DLN	File Maintenance Charge file has an "X" at the abstractable field.
<input type="checkbox"/> 10. <i>The licensing sanction is reportable to the State Police</i> <input type="checkbox"/> Revoked <input type="checkbox"/> Suspended ___ days <input type="checkbox"/> Restricted ___ days	PETITION	ORIG PACC AMMND PACC	File Maintenance Charge file has an "X" at the abstractable field.
THE COURT FINDS:			
<input type="checkbox"/> 11. <i>It is contrary to the welfare of the juvenile to remain in the home _____.</i>			
NOTE: This line will always print.			
<input type="checkbox"/> 12. <i>Based on</i> <input type="checkbox"/> <i>the following findings</i> <input type="checkbox"/> <i>the report _____ dated _____</i> <input type="checkbox"/> <i>testimony of _____ backed up by written transcript</i> <i>reasonable efforts</i> <input type="checkbox"/> <i>were</i> <input type="checkbox"/> <i>were not made</i> <i>prior to the placement of the juvenile in foster or</i> <i>other out-of-home care, to prevent or eliminate</i> <i>the need for removing the juvenile from his/her</i> <i>home.</i>			
NOTE: This line will always print.			
13. <i>The juvenile is placed in the temporary custody of this court.</i>			
NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
14. <input type="checkbox"/> a. The juvenile is committed to the Michigan Family Independence Agency (FIA) under MCL803.301(Y.R.A.) <input type="checkbox"/> b. The juvenile is referred to the Michigan Family Independence Agency for placement and care under MCL 400.55(h). <input type="checkbox"/> c. The juvenile is placed in and shall satisfactorily complete the juvenile boot camp program established by the Michigan Family Independence Agency. After satisfactorily completing the program, the juvenile shall be placed in the home of _____ and shall complete a minimum of 120 to a maximum of 180 days of intensive supervised probation in the community.	EVENT	Results	COM
	EVENT	Results	RDS
	EVENT	Results	BOT
15. The Director of the Michigan FIA is appointed special guardian to receive any benefits now due or to become due the juvenile from the government of the United States and pending transfer to the Michigan FIA, temporary placement is as follows:	EVENT	Placement Placement Type	
16. _____ shall participate in treatment programs reasonably available to the parent/guardian/legal custodian. NOTE: This line will always print.			
17. Reimbursement for the cost of care and attorney fees shall be paid as follows: NOTE: This line will always print.			
18. Restitution shall be paid as follows: NOTE: This line will always print.	FIN ORDER	Cost Type	RST
19. A service fee shall be paid as follows:	FIN ORDER	Cost Type	ADM
<input type="checkbox"/> 20. Other: NOTE: Other orders will print here based on entries made to the results field of the event screen.			
Signature Line	EVENT	Jurist	

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER OF DISPOSITION CHILD REMOVED FROM HOME (CHILD PROTECTIVE PROCEEDINGS), PAGE 1	CASE NO. PETITION NO.
Court address	Court telephone no.	

1. In the matter of
(name(s), alias(es), DOB)

2. Date of hearing: _____ Judge/Referee: _____ Bar no.

3. An adjudication was held and one or more of the statutory grounds alleged in the petition were proven.

4. Notice of hearing for the disposition was given as required by law.

5. The court has considered the case service plan and other evidence presented. Specific findings of fact and law regarding this proceeding have been made on the record.

THE COURT FINDS:

☐ 6. Placement/continuation of the child's residence in the home of _____
_____ is contrary to the welfare of the child(ren) because

7. ☐ a. Based on
☐ the following findings (attach list if more space is needed)

☐ the report _____ dated _____
Identify type of report

☐ testimony of _____ backed up by written transcript
Name

reasonable efforts ☐ were ☐ were not made prior to the placement of the child(ren) in foster care, to prevent or eliminate the need for removing the child(ren) from the child(ren)'s home and
reasonable efforts ☐ were ☐ were not made to prevent the child(ren)'s removal from child(ren)'s home or to rectify the conditions that caused the child(ren)'s removal from the child(ren)'s home in accordance with MCL 712A.18f(4).

☐ b. Reasonable efforts to preserve and unify the family are not required because the parent subjected the child(ren) or another child of the parent to abuse including one or more of the types under MCL 712A.19b(3)(k).

☐ 8. Parenting time with _____, even if supervised, may be harmful to the child(ren).

NOTE: Contrary to the welfare and reasonable efforts findings only need to be made if the findings had not already been made at a prior hearing and this is the first time the child has been removed from the home.

(SEE SECOND PAGE)

Do not write below this line - For court use only

PL 96-272; 42 USC 670 et seq., MCL 400.55(h), MCL 400.203,
MCL 712A.13a, MCL 712A.18, MCL 712A.18f, MCL 712A.20, MCR 3.973(F)

JC 26 (6/03) ORDER OF DISPOSITION, CHILD REMOVED FROM HOME (CHILD PROTECTIVE PROCEEDINGS), PAGE 1

**Order of Disposition Child Removed from Home
(Child Protective Proceedings)
06/03 - JC26**

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 26 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
3. <i>An adjudication was held and one or more of the statutory grounds alleged in the petition were proven.</i> NOTE: This line will always print.			
4. <i>Notice of hearing for the disposition was given as required by law.</i> NOTE: This line will always print.			
5. <i>The court has considered the case service plan and other evidence presented. Specific findings of fact and law regarding this proceeding have been made on the record.</i> NOTE: This line will always print.			
THE COURT FINDS: <input type="checkbox"/> 6. <i>Placement/continuation of the child's residence in the home of _____ is contrary to the welfare of the child(ren) because _____.</i> NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
<p>7. <input type="checkbox"/> a. Based on</p> <p><input type="checkbox"/> the following findings</p> <p><input type="checkbox"/> the report _____ dated _____</p> <p><input type="checkbox"/> testimony of _____ backed up by written transcript</p> <p>reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made</p> <p>prior to the placement of the child(ren) in foster</p> <p>care, to prevent or eliminate the need for remov-</p> <p>ing the child(ren) from the child(ren)'s home and</p> <p>reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made to</p> <p>prevent the child(ren)'s removal from the</p> <p>child(ren)'s home or to rectify the conditions that</p> <p>caused the child(ren)'s removal from the</p> <p>child(ren)'s home in accordance with</p> <p>MCL712A.18f(4).</p> <p><input type="checkbox"/> b. Reasonable efforts to preserve and unify</p> <p>the family are not required because the parent</p> <p>subjected the child(ren) or another child of the</p> <p>parent to abuse including one or more of the</p> <p>types under MCL 712A.19b(k).</p> <p>NOTE: This line will always print.</p>			
<p><input type="checkbox"/> 8. Parenting time with _____, even if supervised,</p> <p>may be harmful to the child(ren).</p> <p>NOTE: This line will always print.</p>			
<p>IT IS ORDERED:</p> <p>9. The child(ren) are in the temporary custody of</p> <p>this court and are:</p> <p><input type="checkbox"/> a. referred to the Michigan FIA for placement</p> <p>and care under MCL 400.55(h). It is recom-</p> <p>mended the child(ren) be placed _____.</p> <p><input type="checkbox"/> b. committed to Michigan FIA under</p> <p>MCL400.203 for observation for a period of</p> <p>_____ days.</p> <p><input type="checkbox"/> c. placed in the home of relative _____.</p>	<p>CASE</p> <p>EVENT</p> <p>EVENT</p> <p>EVENT</p>	<p>Legal Status</p> <p>Results</p> <p>Placement</p> <p>Placement Type</p> <p>Results</p> <p>Placement</p>	<p>TWC or TWS</p> <p>RDS</p> <p>Facility</p> <p>CMO</p> <p>PTS, F01, M01,</p> <p>REL</p>

Line From the Order Form	Screen	Field	Codes
<p>10. <i>The parent, guardian, and/or legal custodian of the child(ren), within 7 days, shall provide the supervising agency with the name and address of the medical provider(s) for the child(ren).</i></p> <p>NOTE: This line will always print.</p>			
<p>11. <i>In any relative placement, the following apply:</i></p> <p><i>a. The parent/guardian/legal custodian shall execute all documents necessary to release confidential information regarding the child(ren) including medical, mental, and educational reports. Any medical provider of the child(ren) shall release the medical records of the child(ren) to the supervising agency.</i></p> <p><i>b.If a home study has not yet been completed, then one shall be performed by the FIA and a copy of the home study submitted to the court not more than 30 days after the placement.</i></p> <p><i>c. Upon request, the FIA shall release to the foster parent the information concerning the child(ren) in accordance with MCL712A.13a(13).</i></p> <p>NOTE: This line will always print.</p>			
<p>12. <i>The Director of the Michigan Family Independence Agency is appointed special guardian to receive any benefits now due or to become due the child(ren) from the government of the United States.</i></p> <p>NOTE: This line will always print.</p>			
<p>13. <i>Parent(s) shall comply with the case service plan dated _____ <input type="checkbox"/> as modified at the hearing <input type="checkbox"/> and additionally shall:</i></p> <p>NOTE: This line will always print.</p>			
<p><input type="checkbox"/> 14. <i>Parenting time of _____ is as follows:</i></p> <p><input type="checkbox"/> <i>frequent and unsupervised as approved by</i></p> <p><input type="checkbox"/> <i>frequent and supervised by the Family Independence Agency.</i></p> <p><input type="checkbox"/> <i>suspended while psychological evaluation or counseling is conducted and until ordered by the court.</i></p> <p><input type="checkbox"/> <i>suspended pending proceedings on the termination process</i></p> <p>NOTE: This line will always print.</p>			

Line From the Order Form	Screen	Field	Codes
15. Parenting time of _____ is as follows: <input type="checkbox"/> frequent and unsupervised as approved by <input type="checkbox"/> frequent and supervised by the Family Independence Agency. <input type="checkbox"/> suspended while psychological evaluation or counseling is conducted and until ordered by the court. <input type="checkbox"/> suspended pending proceedings on the termi- nation process			
NOTE: This line will always print.			
<input type="checkbox"/> 16. Other:			
NOTE: Other orders will print based on entries made to the results field on the event screen.			
<input type="checkbox"/> 17. Notice of Hearing: Review hearings shall be held as follows: <input type="checkbox"/> *a foster family agreement or permanent relative placement has been approved - see MCL712A.19(4) and 712A.13a(1)(h). <input type="checkbox"/> 91 day review _____ <input type="checkbox"/> 182 day review* _____ <input type="checkbox"/> Permanency planning hearing _____ <input type="checkbox"/> other review _____	EVENT EVENT EVENT EVENT	Next Hearing Next Hearing Next Hearing Next Hearing	SRE DRH PPH Any other hrg code
Signature Line	EVENT	Jurist	

Approved, SCAO STATE OF MICHIGAN JUDICIAL CIRCUIT PROBATE COURT COUNTY	NOTICE TO PRIOR COURT OF PROCEEDINGS AFFECTING MINOR(S)	Original - Originating court Copies as needed CASE NO.
--	--	--

Court address	Court telephone no.
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Name(s) of parent(s)/guardian(s)/plaintiff/defendant	Name(s), alias(es), and dates of birth of minor(s)
--	--

Case no. of other court (if known) _____

TO: County of _____

☐ Court Clerk or Register
☐ Friend of the Court
☐ Prosecuting Attorney
☐ Juvenile Officer

NOTICE:

1. ☐ a. A complaint/petition/motion was filed with this court which affects the minor(s) who are subject to the continuing jurisdiction of your court. A hearing on the complaint/petition/motion is scheduled for

Date _____

Time _____

Location _____

☐ b. The attached order was entered on _____ Date _____.

2. The actions of the court in this matter may supersede part or all of the order(s) previously entered by your court as the best interests of the minor(s) require.

Date _____	Court clerk/Register/Deputy signature _____
------------	---

CERTIFICATE OF MAILING

I certify that on this date I mailed a copy of this notice to the prior court by first class mail.

Date _____	Signature _____
------------	-----------------

Do not write below this line - For court use only

MC 28 (9/97) NOTICE TO PRIOR COURT OF PROCEEDINGS AFFECTING MINOR(S)
MCL 712A.2(b)(2); MSA 27.3178(598.2(b)(2)), MCL 712A.3a; MSA 27.3178(598.3a), MCR 3.205, MCR 5.112, MCR 5.927

Notice to Prior Court of Proceedings Affecting Minor 09/97 - MC28

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 28 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i> <i>Parent/Guardian Name and Address</i> NOTE: Case number of the other court must be manually entered.	CASE	Name DOB	
<i>TO: County of _____</i> <input type="checkbox"/> <i>Court Clerk or Register</i> <input type="checkbox"/> <i>Friend of the Court</i> <input type="checkbox"/> <i>Prosecuting Attorney</i> <input type="checkbox"/> <i>Juvenile Officer</i> NOTE: The system will automatically enter the county name.			
NOTICE 1. <input type="checkbox"/> <i>a. A complaint/petition/motion was filed with this court which affects the minor(s) who are subject to the continuing jurisdiction of your court. A hearing on the complaint / petition / motion is scheduled for _____.</i> <input type="checkbox"/> <i>b. The attached order was entered on _____.</i> NOTE: The location comes from the File Maintenance - Places file or Courtroom File.	EVENT FILE MAINT EVENT	Next Hearing Places File Date	
2. <i>The actions of the court in this matter may supersede part or all of the order(s) previously entered by your court as the best interests of the minor(s) require.</i> NOTE: This line will always print.			
<i>Signature Lines</i>			

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	REQUEST AND ORDER TERMINATING COURT JURISDICTION	CASE NO. PETITION NO.
Court address		Court telephone no.
<p>1. In the matter of (name(s), alias(es), DOB)</p> <div style="text-align: center; border: 1px solid black; width: 100px; margin: 10px auto; padding: 2px 5px;">REQUEST</div> <p>2. I, _____, _____, request that the jurisdiction <div style="display: flex; justify-content: space-between; width: 100%;"> Name Title </div> of this court be terminated, <input type="checkbox"/> with <input type="checkbox"/> without a hearing, for the following reason:</p> <p><input type="checkbox"/> a. Terms of probation have been completed.</p> <p><input type="checkbox"/> b. Minor has attained maximum jurisdictional age.</p> <p><input type="checkbox"/> c. Minor is in the full care, custody, and control of parent(s), guardian(s), or legal custodian(s), and further court supervision is unnecessary.</p> <p><input type="checkbox"/> d. Money is owed to the court as follows:</p> <p><input type="checkbox"/> e. Other:</p> <p>I declare that this request has been examined by me and that its contents are true to the best of my information, knowledge, and belief.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 40%;">Signature _____</div> <div style="width: 10%;">Date _____</div> <div style="width: 50%;">Address _____</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 40%;">Name (type or print) _____</div> <div style="width: 30%;">City, state, and zip _____</div> <div style="width: 30%;">Telephone no. _____</div> </div> <div style="text-align: center; margin-top: 10px; border: 1px solid black; width: 100px; margin: 0 auto; padding: 2px 5px;">ORDER</div> <p>3. IT IS ORDERED that the jurisdiction of this court is terminated in this case except that the court reserves the right to enforce payments of any delinquent account or unpaid reimbursement order unpaid as of the date of this order. Any wage assignment presently in effect shall remain until the sums owed by the employee are paid in full.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%;">Date _____</div> <div style="width: 40%;">Judge _____</div> <div style="width: 30%;">Bar no. _____</div> </div> <div style="border: 1px solid black; height: 100px; margin-top: 10px; position: relative;"> <div style="position: absolute; top: 5px; right: 5px; text-align: center;">Do not write below this line - For court use only</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 60%;">JC 36 (6/03) REQUEST AND ORDER TERMINATING COURT JURISDICTION</div> <div style="width: 35%; text-align: right; font-size: small;">MCL 712A.18(2), MCL 712A.18c(4), MCL 712A.19(1), MCR 3.932(C)(7)</div> </div>		

Request and Order Terminating Court Jurisdiction 06/03 - JC36

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 36 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>I, _____, _____, request that the jurisdiction of this court be terminated, <input type="checkbox"/> with <input type="checkbox"/> without a hearing, for the following reason:</i> <input type="checkbox"/> a. <i>Terms of probation have been completed.</i> <input type="checkbox"/> b. <i>Minor has attained maximum jurisdictional age.</i> <input type="checkbox"/> c. <i>Minor is in the full care, custody, and control of parent(s), guardian(s), or legal custodian(s) and further court supervision is unnecessary.</i> <input type="checkbox"/> d. <i>Money is owed to the court as follows:</i> <input type="checkbox"/> e. <i>Other:</i> <i>I declare that this request has been examined by me and that its contents are true to the best of my information, knowledge, and belief.</i> <i>Signature Line</i> NOTE: This line will always print.	EVENT	Date Jurist	
3. IT IS ORDERED <i>that the jurisdiction of this court is terminated in this case except that the court reserves the right to enforce payments of any delinquent account or unpaid reimbursement order unpaid as of the date of this order. Any wage assignment presently in effect shall remain until the sums owed by the employee are paid in full.</i> NOTE: This line will always print.			
<i>Signature Line</i>	EVENT	Jurist	

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER FOR REIMBURSEMENT	CASE NO. PETITION NO.
Court address		Court telephone no.
<p>1. In the matter of (name(s), alias(es), DOB)</p> <p>2. Date of hearing: _____ Judge: _____ Bar no. _____</p> <p>THE COURT FINDS:</p> <p>3. _____, of Name(s) and relationship(s) to minor(s) _____ has(have) been found to be financially able to reimburse the Name of minor(s) _____ court for costs incurred.</p> <p>IT IS ORDERED:</p> <p>4. Costs and expenses are assessed as follows:</p> <p><input type="checkbox"/> a. Court appointed attorney in the amount billed by attorney and approved by court; current charges \$ _____.</p> <p><input type="checkbox"/> b. Minor's care, clothing, medical, dental, optical, and other needs that the court determines necessary, in the amount of: \$ _____ per _____, beginning _____. Date _____ \$ _____ per _____, beginning _____. Date _____</p> <p><input type="checkbox"/> c. Court services of: \$ _____ per _____, beginning _____. Date _____</p> <p><input type="checkbox"/> d. Other:</p> <p>5. Reimbursement for the above charges shall be as follows:</p> <p>_____ shall reimburse Name(s) _____ the court at the rate of \$ _____ per _____, beginning _____. Date _____ continuing until the balance is paid in full. Payments are payable to _____ Name and address _____</p> <p>Please include the case number with payment.</p> <p>6. Payments shall be applied against assessed charges as follows:</p>		
Date _____	Judge _____	
Do not write below this line - For court use only		
<div style="display: flex; justify-content: space-between;"> JC 38 (6/03) ORDER FOR REIMBURSEMENT MCL 712A.17c(8), MCL 712A.18, MCR 3.915(E), MCR 3.916(D) </div>		

Order for Reimbursement 06/03 - JC38

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 38 in the form number request field at the bottom of the screen and press <Enter>.

Note: In the event comment field, you will need to enter the party type code for the person this order is for. Example: F01.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
THE COURT FINDS			
3. _____, of _____ has(have) been found to be financially able to reimburse the court for costs incurred.	EVENT CASE	Comment Line Name	Party Type Code
4. <i>Costs and expenses are assessed as follows:</i> <input type="checkbox"/> a. Court appointed attorney in the amount billed by attorney and approved by court, current charges \$_____. <input type="checkbox"/> b. Minor's care, clothing, medical, dental, optical, and other needs that the court determines necessary, in the amount of: <input type="checkbox"/> c. court services of: <input type="checkbox"/> d. Other:	FIN ORDER	Cost Type	
5. <i>Reimbursement for the above charges shall be as follows:</i> _____ shall reimburse the court at the rate of \$____ per _____, beginning _____ continuing until the balance is paid in full. Payments are payable to _____. Please include the case number with payment. NOTE: This line will always print.	EVENT	Comment Line	Party type code
6. <i>Payments shall be applied against assessed charges as follows:</i> NOTE: This line will always print.			
Signature Line	EVENT	Jurist	

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER FOR ASSIGNMENT OF WAGES	CASE NO. PETITION NO.
Court address		Court telephone no.
<p>1. In the matter of (name(s), alias(es), DOB)</p> <p>2. Date of hearing: _____ Judge: _____ Bar no. _____</p> <p>THE COURT FINDS:</p> <p>3. On _____ this court entered an order directing _____ Date Name to reimburse the court for costs assessed in the above matter.</p> <p>4. The above person has failed to comply with the order of reimbursement and is in contempt of court.</p> <p>IT IS ORDERED:</p> <p>5. _____ , _____ Name Address _____ , employer, shall withhold from the earnings due the person the amount of \$ _____ per week, effective one week after service upon the employer of a true copy of this order, and shall forward the withholding to:</p> <p>_____ , _____ Name Address _____ .</p> <p>6. The employer shall not use the assignment as a basis, in whole or in part, for the discharge of the employee or for any other disciplinary action against the employee.</p> <p>7. Your compliance with this order is required by law.</p> <p>8. This order shall remain in full force and effect until further order of the court.</p>		
Date _____	Judge _____	
<div style="border: 1px solid black; height: 100px; margin-top: 20px;"></div>		
<div style="border: 1px solid black; height: 100px; margin-top: 20px;"></div>		
<div style="border: 1px solid black; height: 100px; margin-top: 20px;"></div>		

JC 39 (6/03) ORDER FOR ASSIGNMENT OF WAGES

MCL 712A.18b

Order for Assignment of Wages 06/03 - JC39

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 39 in the form number request field at the bottom of the screen and press <Enter>.

Note: In the event comment field, you will need to enter the party type code for the person this order is for. Example: F01.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
THE COURT FINDS	Prior EVENT Prior EVENT EVENT	Date Type Comment	ORC Party Type Code
3. <i>On _____ this court entered an order directing _____ to reimburse the court for costs assessed in the above matter.</i>			
4. <i>The above person has failed to comply with the order of reimbursement and is in contempt of court..</i>			
NOTE: This line will always print.			
5. <i>_____, _____ employer, shall withhold from the earnings due the person the amount of \$_____ per week, effective one week after service upon the employer of a true copy of this order; and shall forward the withholding to: _____, _____</i>			
NOTE: This line will always print.			
6. <i>The employer shall not use the assignment as a basis, in whole or in part, for the discharge of the employee or for any other disciplinary action against the employee.</i>			
NOTE: This line will always print.			
7. <i>Your compliance with this order is required by law.</i>			
NOTE: This line will always print.			
8. <i>This order shall remain in full force and effect until further order of the court.</i>			
NOTE: This line will always print.			
Signature Line	EVENT	Jurist	

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	NOTICE OF HEARING	CASE NO. PETITION NO.
Court address _____ Court telephone no. _____		
In the matter of (name(s), alias(es), DOB)		
TO:		
TAKENOTICE: A hearing will be held on _____ at _____ m., at <div style="display: flex; justify-content: space-between; width: 100%;"> Date Time </div>		
Location _____ before Judge/Referee _____ Bar no. _____		
FOR THE FOLLOWING PURPOSE:		
<input type="checkbox"/> Preliminary hearing <input type="checkbox"/> Pretrial <input type="checkbox"/> Trial <input type="checkbox"/> Determination of support <input type="checkbox"/> Hearing on violation of a minor personal protection order <input type="checkbox"/> Hearing to extend jurisdiction over the juvenile until 21 years of age; the juvenile has the right to an attorney at this hearing <input type="checkbox"/> Permanency planning hearing to review the status of the child(ren) and the progress being made toward the child(ren)'s return home or permanent placement. Notice: The hearing may result in further proceedings to terminate parental rights. <input type="checkbox"/> Hearing to terminate parental rights <input type="checkbox"/> Post-termination review hearing <input type="checkbox"/> Other: _____ <div style="text-align: center; font-size: small;">Type of hearing</div>		
ADVICE OF LEGAL RIGHTS:		
<ul style="list-style-type: none"> If you are the juvenile or respondent, you have a right to be represented by an attorney. If you desire to employ an attorney, you should do so immediately in order that s/he may be ready at the hearing date. If you are financially unable to employ an attorney, you must notify the court immediately upon receipt of this notice. If the court appoints an attorney, you may be required to reimburse the court in whole or in part for the cost of such services. Court rules require the appointment of an attorney for minors in certain cases. If your child(ren) fall under this category, an attorney will be appointed by the court. 		
If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you to fully participate in court proceedings, please contact the court immediately to make arrangements.		
NOTE TO CLERK: Complete a separate Proof of Service form (JC 12a or JC 12b)	Do not write below this line - For court use only	
JC 45 (6/03) NOTICE OF HEARING	MCL 712A.19(5), MCL 712A.19a, MCL 712A.19b, MCR 3.920(C), MCR 3.945(B)(1)b, MCR 3.963(C)(2), MCR 3.976(C), MCR 3.977(C), MCR 3.978(B), MCR 3.985(C)	

Notice of Hearing 09/01 - JC45

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 45 in the form number request field at the bottom of the screen and press <Enter>. The following screen will be displayed.

FORMS GENERATION INFORMATION SHEET

ADDITIONAL PROFESSIONAL: _____

ENTER "X" TO SELECT PARTIES AND/OR THEIR ATTORNEYS:

"X"	SFX	PETITION	CODE	PARTY NAME	"X"	ATY/WKR	NAME
<input type="checkbox"/>	02	00000000		TEST NAME 123,,	<input type="checkbox"/>		NO ATTORNEY
<input type="checkbox"/>	01	00000000	F01	TESTFATHER,,	<input type="checkbox"/>		NO WORKER
<input type="checkbox"/>	01	00000002	V01	TEST VICTIME,,	<input type="checkbox"/>		NO ATTORNEY
<input type="checkbox"/>	02	00000000	CMP	TEST,123,	<input type="checkbox"/>		NO ATTORNEY
<input type="checkbox"/>	02	00000001	V02	ROMANTIC,,	<input type="checkbox"/>		NO ATTORNEY

More...

ENTER "X" FOR PROOF OF SERVICE: ☐ PERSONAL SERVICE OR ☐ SERVICE BY MAIL

F3=EXIT--NO PROCESSING ENTER=PROCESS REQUEST

05/026

1902 - Session successfully started \\SCAO\11N54QL5 on Ne05:

1. Enter additional professional numbers in the fields provided.
 2. Place an "X" next to the names of the individuals that will be included on the notice of hearing.
 3. Place an "X" next to the appropriate proof of service option to create a proof of service.
- Once all information has been entered, press <Enter>. The system will display the following screen.

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	SUPPLEMENTAL ORDER OF DISPOSITION FOLLOWING REVIEW HEARING (DELINQUENCY PROCEEDINGS), PAGE 1	CASE NO. PETITION NO.
Court address _____ Court telephone no. _____		
1. In the matter of (name(s), alias(es), DOB) _____		
2. Date of Hearing: _____ Judge/Referee: _____		
3. <input type="checkbox"/> Review <input type="checkbox"/> Hearing to extend jurisdiction _____ Bar no. _____		
4. As of the last order, dated _____, the juvenile was placed with _____		
_____ in the temporary custody of the court.		
5. Notice of hearing for the review was served as required by law.		
<input type="checkbox"/> 6. The juvenile appeared in court in person with parent(s), guardian, legal custodian, guardian ad litem, and/or		
<input type="checkbox"/> had <input type="checkbox"/> waived an attorney.		
THE COURT FINDS:		
<input type="checkbox"/> 7. Restitution has been made as ordered.		
<input type="checkbox"/> 8. The juvenile has not been rehabilitated.		
<input type="checkbox"/> 9. The juvenile presents a serious risk to public safety.		
<input type="checkbox"/> 10. The case service plan has been successfully completed (for use when terminating jurisdiction).		
<input type="checkbox"/> 11. The juvenile has reached an age no longer within the jurisdiction of the court (for use when terminating jurisdiction).		
<input type="checkbox"/> 12. The juvenile must be placed in an institution outside Michigan.		
a. institutional care is in the best interests of the juvenile,		
b. equivalent facilities to meet the juvenile's needs are not available within Michigan, and		
c. the placement will not cause undue hardship.		
<input type="checkbox"/> 13. It is contrary to the welfare of the juvenile to remain in the home because _____		
<input type="checkbox"/> 14. Based on _____		
<input type="checkbox"/> the following findings (attach list if more space is needed)		
<input type="checkbox"/> the report _____ dated _____		
Identify type of report		
<input type="checkbox"/> testimony of _____ backed up by written transcript		
Name		
reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made prior to the placement of the juvenile in foster or other out-of-home care, to prevent or eliminate the need for removing the juvenile from his/her home.		
<input type="checkbox"/> 15. The permanency plan is _____		
Reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made to place the juvenile in a timely manner in accordance with the permanency plan and to complete whatever steps are necessary to finalize the permanent placement of the juvenile.*		
NOTE: If the juvenile had been previously removed from the home, was then returned to the home, and is being removed again through this order, contrary to the welfare and reasonable efforts findings must be made even though the findings had been made at a prior hearing.		
*These reasonable efforts findings must be made within 12 months from when the juvenile was last removed from the home and every 12 months afterward to preserve IV-E funding.		
Do not write below this line - For court use only		
(SEE SECOND PAGE)		
MCL 712A.18, MCL 712A.18c, MCL 712A.18d, MCL 712A.19, MCL 712A.20, MCL 712A.24, MCR 3.945		
JC 57 (6/03) SUPPLEMENTAL ORDER OF DISPOSITION FOLLOWING REVIEW HEARING (DELINQUENCY PROCEEDINGS), PAGE 1		

Supplemental Order of Disposition Following Review Hearing (Delinquency Proceedings) 06/03 - JC57

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 57 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
3. <input type="checkbox"/> Review <input type="checkbox"/> Hearing to extend jurisdiction NOTE: This line will always print.			
4. <i>As of the last order, dated _____, the juvenile was placed with _____ in the temporary custody of the court.</i>	Prior EVENT CASE	Date Placement Placement Type	
5. <i>Notice of hearing for the review was served as required by law.</i> NOTE: This line will always print.			
<input type="checkbox"/> 6. <i>The juvenile appeared in court in person with parent(s), guardian, legal custodian, guardian ad litem, and/or <input type="checkbox"/> had <input type="checkbox"/> waived an attorney.</i>	EVENT	Attny	
THE COURT FINDS <input type="checkbox"/> 7. <i>Restitution has been made as ordered.</i> NOTE: This line will always print.			
<input type="checkbox"/> 8. <i>The juvenile has not been rehabilitated.</i> NOTE: This line will always print.			
<input type="checkbox"/> 9. <i>The juvenile presents a serious risk to public safety.</i>	EVENT	Results	EPS
<input type="checkbox"/> 10. <i>The case service plan has been successfully completed (for use when terminating jurisdic- tion).</i>	EVENT	Results	SCP
<input type="checkbox"/> 11. <i>The juvenile has reached an age no longer with- in the jurisdiction of the court (for use when ter- minating jurisdiction).</i>	EVENT	Results	TJA

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 12. <i>The juvenile must be placed in an institution outside Michigan.</i> <i>a. institutional must be placed in an institution outside Michigan.</i> <i>b. equivalent facilities to meet the juvenile's needs are not available within Michigan, and</i> <i>c. the placement will not cause undue hardship.</i> NOTE: This line will always print.	CASE	Name DOB	
13. <i>It is contrary to the welfare of the juvenile to remain in the home because _____.</i> NOTE: This line will always print.			
<input type="checkbox"/> 14. <i>Based on</i> <input type="checkbox"/> <i>the following findings</i> <input type="checkbox"/> <i>the report _____ dated _____</i> <input type="checkbox"/> <i>testimony of _____ backed up by written transcript</i> <i>reasonable efforts</i> <input type="checkbox"/> <i>were</i> <input type="checkbox"/> <i>were not made</i> <i>prior to placement of the juvenile in foster or other out-of-home care, to prevent or eliminate the need for removing the juvenile from his/her home.</i> NOTE: This line will always print.			
15. <i>The permanency plan is _____</i> <i>Reasonable efforts</i> <input type="checkbox"/> <i>were</i> <input type="checkbox"/> <i>were not made to place the juvenile in a timely manner in accordance with the permanency plan and to complete whatever steps are necessary to finalize the permanent placement of the juvenile.*</i> NOTE: This line will always print.			
IT IS ORDERED:			
<input type="checkbox"/> 16. <i>The previous order dated _____ shall remain in full force and effect.</i>	EVENT	Results	CPO
<input type="checkbox"/> 17. <i>The juvenile shall remain in the _____.</i> NOTE: <i>Placement type will be check first if legal status is TWS or PWS.</i>	CASE	Legal Status Placement Placement type	TWC/PWC Any Placement If status is TWS/PWS
THE COURT FINDS			
<input type="checkbox"/> 18. <i>The juvenile's placement shall be changed to _____.</i> NOTE: <i>If the event placement is different than that on the case screen, the event placement will be used.</i>	CASE	Legal Status Placement Placement Type	TWC/PWC Any placement

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 19. <i>The juvenile is placed in and shall satisfactorily complete the juvenile boot camp program established by the Michigan Family Independence Agency. Upon satisfactorily completing the program, the juvenile shall be placed in the home of _____ and shall complete a minimum of 120 to a maximum of 180 days on intensive probation in the community.</i> NOTE: This line will always print.	EVENT	Results	BOT
<input type="checkbox"/> 20. <i>The juvenile may be released on probation subject to the attached probation rules and regulations.</i>	EVENT	Results Placement	PRO Any relative placement
<input type="checkbox"/> 21. _____ <i>shall participate in treatment programs reasonably available to the parent/guardian.</i> NOTE: This line will always print.			
<input type="checkbox"/> 22. <i>That the jurisdiction of this court be terminated in this case except that the court reserves the right to enforce payments of support and attorney fees that have accrued up to and including the date of this order.</i>	EVENT	Results	CSD
<input type="checkbox"/> 23. <i>Jurisdiction is extended until the juvenile reaches the age of 21.</i>	EVENT	Results	JEX
24. <i>Previous reimbursement orders shall continue.</i> NOTE: This line will always print.			
25. <i>Other:</i> NOTE: <i>Other orders will print here based on entries made in the results field on the event screen.</i>			
<input type="checkbox"/> 26. <i>The next review date is _____.</i>	EVENT	Next Hearing	Any hearing code
<input type="checkbox"/> 27. IT IS RECOMMENDED: <input type="checkbox"/> <i>The juvenile shall remain in the _____</i> <input type="checkbox"/> <i>The juvenile's placement shall be changed to _____</i>	CASE EVENT	Legal Status Placement/type Placement/type	TWS/PWS/SSN Any placement
Signature Line	EVENT	Jurist	

Approved, SCAO _____		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER CANCELLING WAGE ASSIGNMENT	CASE NO. PETITION NO.
Court address _____		Court telephone no. _____
<p>1. In the matter of (name(s), alias(es))</p> <p>THE COURT FINDS:</p> <p>2. On _____ this court entered an order directing _____ <small>Date</small> <small>Name of employer</small></p> <p>to withhold \$ _____ from the wages of _____ to reimburse <small>Amount and terms</small> <small>Name of person responsible for the care of the minor</small></p> <p>the court for costs assessed in the above matter.</p> <p>3. The person responsible for the care of the minor has fulfilled all reimbursement requirements and the court has received full payment.</p> <p>IT IS ORDERED:</p> <p>4. Assignment of wages of _____ is cancelled. <small>Name of person responsible for the care of the minor</small></p>		
_____ <small>Date</small>	_____ <small>Judge</small>	
<div style="border: 1px solid black; width: 40%; margin: 0 auto; padding: 5px;"> Do not write below this line - For court use only </div>		
JC 58 (6/03) ORDER CANCELLING WAGE ASSIGNMENT		MCL 712A.18b

Order Cancelling Wage Assignment 06/03 - JC58

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 57 in the form number request field at the bottom of the screen and press <Enter>.

NOTE: In the event comment field, you will need to enter the party type code for the person this order is for. Example: F01.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
THE COURT FINDS 2. <i>On _____ this court entered an order directing _____ to withhold \$ _____ from the wages of _____ to reimburse the court for costs assessed in the above matter.</i> <i>NOTE: The system will look for a prior event of ASW and take the date and name from that event.</i>	Prior EVENT Prior EVENT EVENT	Date Type Comment	ASW Party Type Code
3. <i>The person responsible for the care of the minor has fulfilled all reimbursement requirements and the court has received full payment.</i> <i>NOTE: This line will always print.</i>			
IT IS ORDERED: 4. <i>Assignment of wages of _____ is cancelled.</i>	EVENT	Comment	Party Type Code
<i>Signature Line</i>	EVENT	Jurist	

Approved, SCAO		STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY		ORDER OF ADJUDICATION (DELINQUENCY PROCEEDINGS) PAGE 1		CASE NO. PETITION NO.	
Court address				Court telephone no.			
ORI MI- Police Report No.		CTN/TCN		SID		DOB	
1. In the matter of (name(s), alias(es))							
2. Date of hearing: _____ Judge/Referee: _____ Bar no. _____							
3. A petition has been filed in this matter and notice of hearing on the petition has been served as required by law.							
4. The juvenile has appeared in court in person with parent(s), guardian, legal custodian, guardian ad litem, and <input type="checkbox"/> had <input type="checkbox"/> waived an attorney.							
5. THE COURT FINDS: The following material allegations of petition dated _____ are sustained or dismissed:							
Count	ADJUDICATED BY Plea* Court Jury	DISMISSED BY*	ALLEGATIONS			CHARGE CODE(S) MCL Citation/PACC Code	

*For plea: insert "A" for admission or "NC" for nolo contendere, For dismissal; insert "D" for dismissed by court or "NP" for dismissed by prosecutor/plaintiff.

☐ 6. A fingerprintable juvenile offense was committed under MCL 28.243 or MCL 28.727. Fingerprints ☐ have ☐ have not been taken.

☐ 7. It is contrary to the welfare of the juvenile to remain in the home because

☐ 8. Based on

☐ the following findings (attach list if more space is needed)

☐ the report _____ dated _____
Identify type of report

☐ testimony of _____ backed up by written transcript

reasonable efforts ☐ were ☐ were not made prior to the placement of the juvenile in foster or other out-of-home care, to prevent or eliminate the need for removing the juvenile from his/her home.

NOTE: If the juvenile had been previously removed from the home, was then returned to the home, and is being removed again through this order, contrary to the welfare and reasonable efforts findings must be made even though the findings had been made at a prior hearing.

(SEE SECOND PAGE)

Do not write below this line - For court use only

JC 59 (6/03) ORDER OF ADJUDICATION (DELINQUENCY PROCEEDINGS), PAGE 1

MCL 712A.18, MCR 3.942

Order Of Adjudication (Delinquency Proceedings) 09/01 - JC59

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 59 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
3. <i>A petition has been filed in this matter and notice of hearing on the petition has been served as required by law.</i> NOTE: This line will always print.			
4. <i>The juvenile has appeared in court in person with parent(s), guardian, custodian, guardian ad litem, and <input type="checkbox"/> had <input type="checkbox"/> waived an attorney.</i>	EVENT	Attny	Bar Number
5. THE COURT FINDS: <i>The following material allegations of the petition dated _____ are sustained:</i> <i>Count</i> ADJUDICATED BY <i>Plea</i> <i>Court</i> <i>Jury</i> DISMISSED BY* ALLEGATIONS CHARGE CODE(S) <i>MCL Citation/PACC code</i> NOTE: If "NOL" found in DIS field, NP will print in the dismissed by field. All other dismissal codes will print "D" for dismissed by court.	PETITION EVENT PETITION PETITION	Open Date Results Num Dis Dis Adjud Code Dis Comment ORIG/PACC AMMND/PACC	Any except PDM AAL, PNC All other codes JUR Any Dismissal Code MCL Codes
<input type="checkbox"/> 6. <i>A fingerprintable juvenile offense was committed under MCL 28.243 or MCL 28.727.</i> <i>Fingerprints <input type="checkbox"/> have <input type="checkbox"/> have not been taken</i> NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 7. <i>It is contrary to the welfare of the juvenile to remain in the home because _____.</i> NOTE: This line will always print.			
<input type="checkbox"/> 8. <i>Based on</i> <input type="checkbox"/> <i>the following findings</i> <input type="checkbox"/> <i>the report _____ dated _____</i> <input type="checkbox"/> <i>testimony of _____ backed up by written transcript</i> <i>reasonable efforts</i> <input type="checkbox"/> <i>were</i> <input type="checkbox"/> <i>were not made</i> <i>prior to the placement of the juvenile in foster or other out-of-home care, to prevent or eliminate the need for removing the juvenile from his/her home.</i> NOTE: This line will always print.			
IT IS ORDERED: <input type="checkbox"/> 9. <i>The matter is adjourned for</i> <input type="checkbox"/> <i>dispositional hearing</i> <input type="checkbox"/> <i>additional testimony</i>	EVENT	Next Hearing	DSP
<input type="checkbox"/> 10. <i>The next hearing is set for _____</i>	EVENT	Next Hearing	Any hearing code
<input type="checkbox"/> 11. <i>Pending disposition, the juvenile shall be under the supervision of this court and shall:</i> <input type="checkbox"/> <i>a. remain in the care and custody of _____, and be subject to the reasonable and lawful commands of the parent(s) and those terms and conditions required by the probation officer.</i> <input type="checkbox"/> <i>b. be placed in licensed foster care and be subject to the rules and conditions of foster care. Parenting time shall be as approved by the probation officer. The parent(s) shall reimburse the Child Care Fund for costs of placement.</i> <input type="checkbox"/> <i>c. be placed at _____. Parenting time shall be as approved by the probation officer. The parent(s) shall reimburse the Child Care Fund for the costs of placement.</i> <input type="checkbox"/> <i>d. cooperate with and participate in services, evaluations, tests, and the dispositional investigation as requested by the probation officer. Parent(s) shall pay the costs of professional testing and evaluations.</i> <input type="checkbox"/> <i>e. cooperate with an evaluation to determine the need for psychiatric or psychological treatment as prescribed by MCL 712A.18I.</i>	CASE EVENT PARTY EVENT EVENT	Legal Status Placement Name Placement or Placement Type Placement or Placement type	CTS/PRO/TWC or PWC M01, F01, PTS Any foster home PFD/PFC Any other placement or placement type

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 13. <i>Parent(s) shall file appropriate financial statements with this court not later than _____.</i> NOTE: This line will always print.			
<input type="checkbox"/> 14. <i>Other:</i> NOTE: Other orders will print here based on entries made to the results field on the event screen.			
<input type="checkbox"/> 15. <i>The juvenile shall pay a \$60.00 assessment pursuant to MCL 712A.18k(4).</i> NOTE: This line will always print.			
<i>Signature Line</i>	EVENT	Jurist	

Approved, SCAO		Original - Payer Copy - Court			
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	NOTICE OF INTENT TO INTERCEPT STATE INCOME TAX	CASE NO. PETITION NO.			
Court address		Telephone no.			
 1. In the matter of (name(s), alias(es), DOB)					
TO: <div style="display: inline-block; width: 150px; height: 100px; border: 1px solid black; margin-top: 20px;"></div>		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>Date of notice</td></tr><tr><td>Social security number</td></tr><tr><td>Amount delinquent</td></tr></table>	Date of notice	Social security number	Amount delinquent
Date of notice					
Social security number					
Amount delinquent					
 1. Any Michigan tax refund due to you may be intercepted for the amount shown above. Your name is being referred to the Michigan Department of Treasury for collection of past due reimbursement for the cost of care and/or service.					
2. You have the right to an informal hearing if you believe the amount claimed above is in error. To request an informal hearing, you must contact the circuit court at the address shown above within 7 days of the date of this notice or another date specified by the court.					
3. Notice to intercept a joint refund will be sent to you automatically by the Michigan Department of Treasury at the time your return is processed.					
<hr/> <div>Do not write below this line - For court use only</div>					
JC 60 (6/03) NOTICE OF INTENT TO INTERCEPT STATE INCOME TAX		MCL 712A.18(2), MCL 769.1(7)			

Notice of Intent to Intercept State Income Tax 06/03 - JC60

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 60 in the form number request field at the bottom of the screen and press <Enter>.

NOTE: In the event comment field, you will need to enter the party type code for the person this order is for. Example: F01

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
TO: <i>Name, Address, City, State & Zip</i> <i>Date of Notice</i> <i>Social Security Number</i> <i>Amount delinquent</i>	EVENT EVENT PARTY FIN ORDER	Comment Date SS #	Party Type Code
1. <i>Any Michigan tax refund due to you may be intercepted for the amount shown above. Your name is being referred to the Michigan Department of Treasury for collection of past due reimbursement for the cost of care and/or service.</i> NOTE: This line will always print.			
2. <i>You have the right to an informal hearing if you believe the amount claimed above is in error. To request an informal hearing, you must contact the circuit court at the address shown above within 7 days of the date of this notice or another date specified by the court.</i> NOTE: This line will always print.			
3. <i>Notice to intercept a joint refund will be sent to you automatically by the Michigan Department of Treasury at the time your return is processed.</i> NOTE: This line will always print.			

Approved, SCAO		Original - Court 1st copy - Debtor 2nd copy - Department of Treasury
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER TO INTERCEPT STATE INCOME TAX	● CASE NO. PETITION NO.
Court address	● Zip code	Court telephone no.

1. In the matter of
(name(s), alias(es))

THE COURT FINDS:

2. On _____ this court entered an order directing
Date

● First, middle initial, and last name	● Social security no.	● First, middle initial, and last name	● Social security no.
_____	_____	_____	_____
Address		Address	
_____		_____	
City, state, zip		City, state, zip	

to reimburse the court for costs of care and/or services assessed in the above matter. The balance owing as of
_____ is \$ _____. The account is delinquent \$ _____.
Date

3. The above person(s) has/have failed to comply with the order of reimbursement and is/are delinquent.

4. A notice of intent to intercept state income tax was sent to _____ on
Name(s)
_____ .
Date

● 5. IT IS ORDERED the Michigan Department of Treasury shall withhold up to \$ _____ of any state income tax refund due the above person(s) and shall forward the withholdings to:

● _____ County/Court name
● _____ Department/Address
● _____ Address
● _____ City, state ● Zip ● Telephone no.

Date _____	Judge _____	Bar no. _____
------------	-------------	---------------

CERTIFICATE OF MAILING

I certify that on this date copies of this order were served upon the person(s) named above by ordinary mail at their last known addresses.

Date _____	Signature _____
------------	-----------------

Do not write below this line - For court use only

JC 61 (6/03) ORDER TO INTERCEPT STATE INCOME TAX
MCL 712A.18(2), MCL 769.1(7)

Order to Intercept State Income Tax 06/03 - JC61

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 60 in the form number request field at the bottom of the screen and press <Enter>.

NOTE: In the event comment field, you will need to enter the party type code for the person this order is for. Example: F01. If this order is for multiple parties, enter both party type codes on the comment line. Example: F01 M01.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>On _____ this court entered an order directing _____ to reimburse the court for costs of care and/or services assessed in the above matter. The balance owing as of _____ is \$ _____. The account is delinquent \$ _____. NOTE: The names and addresses will be taken from the Party screen for the party types entered in the comment line of the event screen. It is imperative that the first code entered on the comments line be the same as the code that was entered on the "Notice of Intent to Intercept State Income Tax". The balance owing is the amount calculated for the first party. The delinquent amount is the financial amount that is 30 days past due.</i>	EVENT EVENT FIN ORDER FIN ORDER	Date comment	Party Type Code
3. <i>The above person(s) has/have failed to comply with the order of reimbursement and is/are delinquent. NOTE: This line will always print.</i>			
4. <i>A notice of intent to intercept state income tax was sent to _____ on _____.</i>	Prior EVENT	Comment Date	Party Type Code
5. IT IS ORDERED <i>the Michigan Department of Treasury shall withhold up to \$ _____ of any state income tax refund due the above person(s) and shall forward the withholdings to: _____.</i> NOTE: This line will always print.			
<i>Signature Line</i>	EVENT	Jurist	
Certificate of Mailing/Signature Line will always print			

Approved, SCAO		Original - Court 1st copy - Debtor 2nd copy - Department of Treasury						
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER TO CANCEL STATE INCOME TAX INTERCEPT	CASE NO. PETITION NO.						
Court address		Court telephone no.						
<p>1. In the matter of (name(s), alias(es))</p> <p>THE COURT FINDS:</p> <p>2. On _____ this court entered an order directing the Michigan Department of Treasury to withhold up to Date \$ _____ of any state income tax refund due to</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border-bottom: 1px solid black; padding-bottom: 5px;">First, middle initial, and last name and social security no.</td> <td style="width: 50%; border-bottom: 1px solid black; padding-bottom: 5px;">First, middle initial, and last name and social security no.</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding-bottom: 5px;">Address</td> <td style="border-bottom: 1px solid black; padding-bottom: 5px;">Address</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding-bottom: 5px;">City, state, zip</td> <td style="border-bottom: 1px solid black; padding-bottom: 5px;">City, state, zip</td> </tr> </table> <p>to reimburse the court for costs of care and/or services assessed in the above matter which had become delinquent.</p> <p>3. The above person(s) paid <input type="checkbox"/> in full \$ _____ on _____ . Date <input type="checkbox"/> in part \$ _____ on _____ . Date</p> <p>4. Other:</p> <p>5. IT IS ORDERED the order to intercept state income tax is cancelled and the Michigan Department of Treasury shall delete the order from its records.</p> <p style="margin-top: 20px;">Date _____ Judge _____ Bar no. _____</p> <div style="text-align: center; margin: 10px 0;"> <div style="border: 1px solid black; padding: 2px 10px; display: inline-block;">CERTIFICATE OF MAILING</div> </div> <p>I certify that on this date copies of this order were served upon the person(s) named above by ordinary mail at their last known addresses.</p> <p style="margin-top: 20px;">Date _____ Signature _____</p> <div style="border: 1px solid black; height: 100px; width: 400px; margin: 10px auto; position: relative;"> <div style="position: absolute; top: 5px; right: 5px; font-size: small;">Do not write below this line - For court use only</div> </div>			First, middle initial, and last name and social security no.	First, middle initial, and last name and social security no.	Address	Address	City, state, zip	City, state, zip
First, middle initial, and last name and social security no.	First, middle initial, and last name and social security no.							
Address	Address							
City, state, zip	City, state, zip							
JC 62 (6/03) ORDER TO CANCEL STATE INCOME TAX INTERCEPT		MCL 712A.18(2), MCL 769.1(7)						

Order to Cancel State Income Tax Intercept 06/03 - JC62

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 62 in the form number request field at the bottom of the screen and press <Enter>.

NOTE: In the event comment field, you will need to enter the party type code for the person this order is for. Example: F01. If this order is for multiple parties, enter both party type codes on the comment line. Example: F01 M01.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>On ____ this court entered an order directing the Michigan Department of Treasury to withhold up to \$ ____ of any state income tax refund due to ____ to reimburse the court for costs of care and/or services assessed in the above matter which had become delinquent.</i> <i>NOTE: The names and addresses will be taken from the Party screen for the party types entered in the comment line of the event screen.</i>	Prior EVENT EVENT	Date Comment	Party Type Code
3. <i>The above person(s) paid <input type="checkbox"/> in full \$ ____ on ____ <input type="checkbox"/> in part \$ ____ on ____.</i> <i>NOTE: If the case balance for the first party is zero, "in full" will print. otherwise "in part" will print.</i> <i>The "In Part" amount will be the last amount paid and the date it was paid.</i>			
4. <i>Other:</i> <i>NOTE: This line will always print.</i>			
5. <i>IT IS ORDERED</i> <i>the order to intercept state income tax is cancelled and the Michigan Department of Treasury shall delete the order from its records.</i> <i>NOTE: This line will always print.</i>			
<i>Signature Line</i>	EVENT	Jurist	
Certificate of Mailing/Signature Line will always print			

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER TERMINATING PARENTAL RIGHTS COMMITMENT TO FAMILY INDEPENDENCE AGENCY (CHILD PROTECTIVE PROCEEDINGS)	CASE NO. PETITION NO.
Court address		Court telephone no.

1. In the matter of
(name(s), alias(es), DOB)

2. Date of hearing: _____ Judge/Referee: _____

3. An adjudication was held and the child(ren) were found to come under the jurisdiction of the court. Bar no.

4. A petition to terminate parental rights has been filed and notice of hearing on the petition was given as required by law.

5. Specific findings of fact and law regarding this proceeding have been made on the record or by separate written opinion of the court.

THE COURT FINDS:

6. Reasonable efforts ☐ were ☐ were not made prior to the placement of child(ren) in foster care, to prevent or eliminate the need for removing the child(ren) from the child(ren)'s home and reasonable efforts ☐ were ☐ were not made to preserve and unify the family to make it possible for the child(ren) to safely return to the child(ren)'s home.

7. There is clear and convincing evidence that a statutory basis exists for terminating the parental rights of _____, parent(s) of the child(ren).

☐ 8. The child(ren) are member(s) of or eligible for membership in an American Indian tribe or band. There is evidence beyond a reasonable doubt, including qualified expert witness testimony, that continued custody of the child(ren) by the parent or Indian custodian is likely to result in serious emotional or physical damage to the child(ren).

IT IS ORDERED:

9. The child(ren) are placed in the permanent custody of this court and parental rights of _____ Name(s) of parent(s) or Indian custodian _____ are terminated. Additional efforts for reunification of the child(ren) with the parent(s) shall not be made.

☐ 10. The child(ren) are committed to the Michigan Children's Institute of the Family Independence Agency under MCL 400.203 for adoptive planning, supervision, care, and placement.

☐ 11. The child(ren) are referred to the _____ Michigan Family Independence Agency for adoptive planning, placement, and care under MCL 400.55h.

12. The Director of the Michigan Family Independence Agency is appointed special guardian to receive any benefits now due or to become due the child(ren) from the government of the United States.

13. Pending transfer to the Michigan Family Independence Agency, temporary placement is as follows:

☐ 14. Other: Include reimbursement provisions as required by MCL 712A.18(2)

15. The court reserves the right to enforce payments of reimbursement that have accrued up to and including the date of this order.

16. A post termination review hearing will be held _____ Date _____

Date _____ Judge _____

Do not write below this line - For court use only

25 USC 1912, MCL 400.201 et seq., MCL 712A.18, MCL 712A.19b, MCL 712A.20, MCR 3.977, MCR 3.980

JC 63 (6/03) ORDER TERMINATING PARENTAL RIGHTS, COMMITMENT TO FAMILY INDEPENDENCE AGENCY
(CHILD PROTECTIVE PROCEEDINGS)

Order Terminating Parental Rights Commitment to Family Independence Agency 06/03 - JC63

This order can be generated from an event ADD or MOD. From the event screen, enter the date the hearing took place, the event type code and all data for the form. Enter 63 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
3. <i>An adjudication was held and the child(ren) were found to come under the jurisdiction of the court.</i> NOTE: This line will always print.			
4. <i>A petition to terminate parental rights has been filed and notice of hearing on the petition was given as required by law.</i> NOTE: This line will always print.			
5. <i>Specific findings of fact and law regarding this proceeding have been made on the record or by separate written opinion of the court.</i> NOTE: this line will always print.			
THE COURT FINDS			
6. <i>Reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made prior to the placement of child(ren) in foster care, to prevent or eliminate the need for removing the child(ren) from the child(ren)'s home and reasonable efforts <input type="checkbox"/> were <input type="checkbox"/> were not made to preserve and unify the family to make it possible for the child(ren) to safely return to the child(ren)'s home.</i> NOTE: This line will always print.			
7. <i>There is clear and convincing evidence that a statutory basis exists for terminating the parental rights of _____, parent(s) of the child(ren).</i> NOTE: This line will always print.			
<input type="checkbox"/> 8. <i>The child(ren) are member(s) of or eligible for membership in an American Indian tribe or band. There is evidence beyond a reasonable doubt, including qualified expert witness testimony, that continued custody of the child(ren) by the parent or Indian custodian is likely to result in serious emotional or physical damage to the child(ren).</i>	CASE	Race	AI

Line From the Order Form	Screen	Field	Codes
IT IS ORDERED:			
9. The child(ren) are placed in the permanent custody of this court and parental rights of _____ are terminated. Additional efforts for reunification of the child(ren) with the parent(s) shall not be made.			
NOTE: This line will always print.			
<input type="checkbox"/> 10. The child(ren) are committed to the Michigan Children's Institute of the Family Independence Agency under MCL400.203 for adoptive planning, placement, and care under MCL400.55h.	EVENT	Result	MCI
<input type="checkbox"/> 11. The child(ren) are referred to the ____ Michigan FIA for adoptive planning, placement, and care under MCL400.55h.	EVENT	Result	RDS
12. The Director of the Michigan FIA is appointed special guardian to receive any benefits now due or to become due the child(ren) from the government of the United States.			
NOTE: This line will always print.			
13. Pending transfer to the Michigan Family Independence Agency, temporary placement is as follows:			
NOTE: This line will always print.			
<input type="checkbox"/> 14. Other:			
NOTE: Other orders will print here based on entries made in the results field of the Event screen.			
15. The court reserves the right to enforce payments of reimbursement that have accrued up to and including the date of this order.			
NOTE: This line will always print.			
16. A post termination review hearing will be held _____.	EVENT	Next Hearing	
Signature Line	EVENT	Jurist	

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER FOLLOWING PERMANENCY PLANNING HEARING (CHILD PROTECTIVE PROCEEDINGS), PAGE 1	CASE NO. PETITION NO.
Court address		Court telephone no.

1. In the matter of _____
 (name(s), alias(es), DOB)

2. Date of hearing: _____ Judge/Referee: _____ Bar no. _____

3. The original petition was filed on _____ and the above named child(ren) are in foster care in the temporary custody of the court.

4. Notice of hearing for permanency planning was served as required by law.

5. The court has considered the case service plan and other evidence presented. Specific findings of fact and law regarding this proceeding have been made on the record. (See the other side for a list of specific conditions which must be reviewed on the record.)

THE COURT FINDS:

6. The permanency plan is _____.

7. Based on
☐ the following findings (attach list if more space is needed)

☐ the report _____ dated _____
Identify type of report

☐ testimony of _____ backed up by written transcript
Name

reasonable efforts ☐ were ☐ were not made to place the child(ren) in a timely manner in accordance with the permanency plan and to complete whatever steps are necessary to finalize the permanent placement of the child(ren).

8. Progress ☐ has ☐ has not been made toward the child(ren)'s return home.

☐ 9. Returning the child(ren) home would cause a substantial risk of harm to the child(ren)'s life, physical health, or mental well-being.

☐ 10. Initiating termination of parental rights to the child(ren) presently is clearly not in the child(ren)'s best interests.
☐ Other permanent placement is not possible and foster care placement should continue for a limited period of time.
☐ It is in the best interests of the child(ren) that foster care placement be continued on a long-term basis.

☐ 11. The child(ren) should not be returned to the parent, guardian, or legal custodian and the agency should initiate proceedings to terminate the parental rights to the child(ren).

☐ 12. Parenting time with _____, even if supervised, may be harmful to the child(ren).

(SEE SECOND PAGE)

Do not write below this line - For court use only

JC 64 (6/03) ORDER FOLLOWING PERMANENCY PLANNING HEARING (CHILD PROTECTIVE PROCEEDINGS), PAGE 1

MCL 712A.19a, MCR 3.976

**Order Following Permanency Planning Hearing
(Child Protective Proceedings)
06/03 - JC64**

This order can be generated from an event ADD or MOD. From the event screen, enter the date the hearing took place, the event type code and all data for the form. Enter 64 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
3. <i>The original petition was filed on _____ and the above named child(ren) are in foster care in the temporary custody of the court.</i>	PETITION	Open Date	
4. <i>Notice of hearing for permanency planning was served as required by law.</i>			
NOTE: This line will always print.			
5. <i>The court has considered the case service plan and other evidence presented. Specific findings of fact and law regarding this proceeding have been made on the record.</i>			
NOTE: this line will always print.			
6. <i>The permanency plan is _____.</i>			
NOTE: This line will always print.			
7. <i>Based on</i> <input type="checkbox"/> <i>The following findings</i> <input type="checkbox"/> <i>the report _____ dated _____</i> <input type="checkbox"/> <i>testimony of _____ backed up by written transcript</i> <i>reasonable efforts</i> <input type="checkbox"/> <i>were</i> <input type="checkbox"/> <i>were not</i> <i>made to place the child(ren) in a timely manner in accordance with the permanency plan and to complete whatever steps are necessary to finalize the permanent place- ment of the child(ren).</i>			
NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
8. Progress <input type="checkbox"/> has <input type="checkbox"/> has not been made toward the child(ren)'s return home. NOTE: This line will always print.			
<input type="checkbox"/> 9. Returning the child(ren) home would cause a substantial risk of harm to the child(ren)'s life, physical health, or mental well being. NOTE: This line will always print.			
<input type="checkbox"/> 10. Initiating termination of parental rights to the child(ren) presently is clearly not in the child(ren)'s best interest. <input type="checkbox"/> Other permanent placement is not possible and the foster placement should continue for a limited period of time. <input type="checkbox"/> It is in the best interests of the child(ren) that foster care placement be continued on a long-term basis. NOTE: This line will always print.			
<input type="checkbox"/> 11. The child(ren) should not be returned to the parent, guardian, or legal custodian and the agency should initiate proceedings to terminate the parental rights to the child(ren). NOTE: This line will always print.			
<input type="checkbox"/> 12. Parenting time with _____, even if supervised, may be harmful to the child(ren). NOTE: This line will always print.			
IT IS ORDERED: <input type="checkbox"/> 13. The Family Independence Agency shall initiate proceedings to terminate parental rights to the child(ren) no later than 42 days from the date of this hearing. NOTE: This line will always print.			
<input type="checkbox"/> 14. The child(ren) are continued in the temporary custody of this court under the supervision of <input type="checkbox"/> the Family Independence Agency <input type="checkbox"/> the court and: <input type="checkbox"/> a. shall be placed in the home of the parents <input type="checkbox"/> b. placement with ____ <input type="checkbox"/> continues <input type="checkbox"/> is changed to _____ <input type="checkbox"/> for a limited basis as follows <input type="checkbox"/> on a long term basis according to the terms and continuations of the most recent case service plan. NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 15. The parent(s)/guardian/legal custodian shall comply with the case service plan dated _____. <input type="checkbox"/> as modified at the hearing <input type="checkbox"/> and additionally shall:	EVENT	TYPE	DCR or ISP
16. Parenting time of _____ is as follows: <input type="checkbox"/> frequent and unsupervised as approved by <input type="checkbox"/> frequent and supervised by the Family Independence Agency. <input type="checkbox"/> suspended while psychological evaluation or counseling is conducted and until ordered by the court. <input type="checkbox"/> suspended pending proceedings on the termination process NOTE: This line will always print.			
17. Parenting time of _____ is as follows: <input type="checkbox"/> frequent and unsupervised as approved by <input type="checkbox"/> frequent and supervised by the Family Independence Agency. <input type="checkbox"/> suspended while psychological evaluation or counseling is conducted and until ordered by the court. <input type="checkbox"/> suspended pending proceedings on the termination process NOTE: This line will always print.			
<input type="checkbox"/> 18. Other: NOTE: Other orders are based on entries to the Event screen or Financial Order Screen.			
Signature Line	EVENT	Date Sign Jurist	
<input type="checkbox"/> A foster family agreement/permanent relative placement has been approved; according to MCL712.A19(4) review hearings may be held every 182 days. Notice: Reviews shall be held as follows: <input type="checkbox"/> A progress review of the child(ren)'s return home shall be made by the <input type="checkbox"/> the next review hearing shall be _____. <input type="checkbox"/> The court recommends placement with _____. <input type="checkbox"/> for a limited basis as follows <input type="checkbox"/> on a long-term basis according to the terms and conditions of the most recent case service plan. NOTE: This line will always print.	EVENT	Next Hearing	PRN

Approved, SCAO STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY		ORDER REMOVING ALLEGED ABUSER FROM CHILD'S HOME (CHILD PROTECTIVE PROCEEDINGS)	CASE NO. PETITION NO.																					
Court address		Court telephone no.																						
1. In the matter of (name(s), alias(es), DOB)																								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3">REGARDING: Alleged abuser's Last name</td> <td>First name</td> <td>Middle initial</td> <td colspan="2">Relationship to child</td> </tr> <tr> <td>Height</td> <td>Weight</td> <td>Race</td> <td>Sex</td> <td>Date of birth or Age</td> <td>Hair color</td> <td>Eye color</td> </tr> <tr> <td colspan="2">Driver license no.</td> <td colspan="2">Social security no.</td> <td colspan="3">Other identifying information</td> </tr> </table>				REGARDING: Alleged abuser's Last name			First name	Middle initial	Relationship to child		Height	Weight	Race	Sex	Date of birth or Age	Hair color	Eye color	Driver license no.		Social security no.		Other identifying information		
REGARDING: Alleged abuser's Last name			First name	Middle initial	Relationship to child																			
Height	Weight	Race	Sex	Date of birth or Age	Hair color	Eye color																		
Driver license no.		Social security no.		Other identifying information																				
2. Date of hearing: _____ Judge/Referee: _____																								
3. Notice of hearing was given as required by law. Bar no. _____																								
THE COURT FINDS:																								
4. A petition alleging abuse of the child(ren) has been authorized and there is probable cause to believe the parent, guardian, legal custodian, or other person committed the alleged abuse.																								
5. The alleged abuser's presence in the home presents a substantial risk of harm to the child(ren)'s life, physical health, or mental well-being.																								
IT IS ORDERED that:																								
6. The alleged abuser named above shall:																								
<input type="checkbox"/> a. leave the home at _____ until further order of the court and have no contact with the child(ren) named above except as follows:																								
<input type="checkbox"/> b. Pay \$_____ as appropriate support to maintain a suitable home environment for the child(ren).																								
<input type="checkbox"/> c. Surrender any firearms or potentially dangerous weapons to _____ Name of local law enforcement agency																								
7. Other:																								
8. This order is valid from _____ until _____ and is effective when the alleged abuser receives notice. A violation of the terms and conditions subjects the alleged abuser to criminal contempt of court. If found guilty of violating this order, the alleged abuser may be jailed for up to 90 days and fined up to \$500.00.																								
9. The local law enforcement authority shall enter the identifying information of the alleged abuser named above on the LEIN system. The court will notify the local enforcement authority of any subsequent amendments to or rescission of this order.																								
Date _____		Judge _____																						
Do not write below this line - For court use only																								
MCL 712A.13a																								
JC 65 (6/03) ORDER REMOVING ALLEGED ABUSER FROM CHILD'S HOME (CHILD PROTECTIVE PROCEEDINGS)																								

**Order Removing Alleged Abuser from Child's Home
(Child Protective Proceedings)
06/03 - JC65**

This order can be generated from an event ADD or MOD. From the event screen, enter the date the hearing took place, the event type code and all data for the form. Enter 65 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<p>1. <i>In the matter of (name(s), alias(es) DOB)</i></p> <p><i>REGARDING: Alleged Abuser Information</i></p> <p>NOTE: Information regarding alleged abuser must be manually entered by the user.</p>	CASE	Name/DOB	
2. <i>Date of Hearing: _____ Judge/Referee: _____</i>	EVENT	Date/Jurist	
<p>3. <i>Notice of hearing was given as required by law:</i></p> <p>NOTE: This line will always print.</p>			
THE COURT FINDS:			
<p>4. <i>A petition alleging abuse of the child(ren) has been authorized and there is probable cause to believe the parent, guardian, legal custodian or other person committed the alleged abuse.</i></p> <p>NOTE: This line will always print.</p>			
<p>5. <i>The alleged abuser's presence in the home presents a substantial risk of harm to the child(ren)'s life, physical health or mental well being.</i></p> <p>NOTE: This line will always print.</p>			
IT IS ORDERED that:			
<p>6. <i>The alleged abuser named above shall:</i></p> <p><input type="checkbox"/> a. <i>Leave the home at _____ until further order of the court and have no contact with the child(ren) named above except as follows:</i></p> <p><input type="checkbox"/> b. <i>Pay \$_____ as appropriate support to maintain a suitable home environment for the child(ren).</i></p> <p><i>c. Surrender any firearms or potentially dangerous weapons to _____.</i></p> <p>NOTE: This line will always print.</p>			
<p>7. <i>Other:</i></p> <p>NOTE: This line will always print.</p>			

Line From the Order Form	Screen	Field	Codes
<p>8. <i>This order is valid from ____ until ____ and is effective when the alleged abuser received notice. A violation of the terms and conditions subjects the alleged abuser to criminal contempt of court. If found guilty of violating this order, the alleged abuser may be jailed up to 90 days and fined up to \$500.00.</i></p> <p>NOTE: This line will always print.</p>			
<p>9. <i>The local law enforcement authority shall enter the identifying information of the alleged abuser named above on the LEIN system. The court will notify the local law enforcement authority of any subsequent amendments to or rescission of this order.</i></p> <p>NOTE: This line will always print.</p>			
<p><i>Signature Line</i></p>			

Approved, SCAO STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY		Original - Court (Part 1) 1st copy - Probation Department (Part 1) 2nd copy - Juvenile (Part 1)		3rd copy - Prosecutor (Part 1) 4th copy - Law enforcement agency (Part 2) 5th copy - Court LEIN copy (Part 2)	
ORDER OF PROBATION (DESIGNATED CASE)		CASE NO. PETITION NO.			
ORI MI- Police Report No.		Court address		Court telephone no.	
1. In the matter of _____		CTN/TCN	SID	DOB	
Juvenile's address, and telephone no.					
Probation officer				Term	
Offense(s)					
<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Sentence delayed under MCL 712A.18(1)(n) <input type="checkbox"/> Judgment of guilt is deferred under: <input type="checkbox"/> MCL 333.7411, Controlled Substance Act <input type="checkbox"/> MCL 750.350a, Parental Kidnapping Act </div> <div> <input type="checkbox"/> Juvenile poses a credible threat to the physical safety of 1 or more persons named in item 8. **needed for NCIC entry </div> </div>					
IT IS ORDERED that the juvenile is placed on probation under the supervision of the above named probation officer for the term indicated, and the juvenile shall:					
2. Not violate any criminal law of any unit of government. 3. Not leave the state without the consent of this court. 4. Make a truthful report to the probation officer monthly, or as often as the probation officer may require, either in person or in writing, as required by the probation officer. 5. Notify the probation officer immediately of any change of address or employment status. <input type="checkbox"/> 6. Not purchase or possess a firearm. **needed for NCIC entry			7. Pay the following to the court: Fine\$ _____ Costs\$ _____ Restitution\$ _____ Crime Victim Assessment\$ 60.00 DNA Sample Assessment\$ _____ Forensic Fee Assessment\$ _____ Supervision Fee\$ _____ Other\$ _____ Total\$ 60.00		
<input type="checkbox"/> Total amount due shall be paid in installments of \$ _____ per _____ starting on _____ Date _____ and paid in full by the due date on the judgment of sentence unless otherwise ordered. The supervision fee is payable immediately and applies to all delayed sentences. A supervision fee may not be ordered or collected for juveniles whose judgment of guilt has been deferred under MCL 750.350a. Fines, costs, and fees not paid within 56 days of the date owed are subject to a 20% late penalty on the amount owed.					
<input type="checkbox"/> 8. Other: (Use this space for conditions for the protection of 1 or more named persons - also complete the LEIN order on Part 2 of this form)					
Failure to comply with this order may result in a revocation of probation and incarceration.					
Date _____		Judge _____		Bar no. _____	
I have read or heard the above order of probation and have received a copy. I understand and agree to comply with this order.					
Date _____		Juvenile signature _____			
If sentence is delayed or judgment of guilt is deferred as stated above, the clerk of the court shall send a photocopy of this order to the Michigan State Police Central Records Division to create a criminal history record as required under MCL 769.16a.					
MCL 712A.18, MCL 712A.18(1)(n), MCL 712A.18k, MCR 3.955, 18 USC 922(g)(8)(c)					
JC 74 (6/03) ORDER OF PROBATION (DESIGNATED CASE), PART 1					

Order of Probation (Designated Case) 06/03 - JC74

This order can be generated from an event ADD or MOD. From the event screen, enter the date the hearing took place, the event type code and all data for the form. Enter 74 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>ORI</i> <i>Police Report No.</i> 1. <i>In the matter of</i> <i>CTN, SID, DOB</i>	PLACES FILE PETITION CASE PETITION	CMP Name, DOB CTN, SID	
<i>Juvenile's address, and telephone no.</i>	EVENT	Date Jurist	
<i>Probation Officer</i> <i>Term</i> NOTE: Term must be manually entered.	PARTY	Party Type	P01
<i>Offense(s)</i> <input type="checkbox"/> <i>Sentence delayed under MCL 712A.18(1)(n)</i> <input type="checkbox"/> <i>Judgment of guilt is deferred under:</i> <input type="checkbox"/> <i>MCL 333.7411, Controlled Substance Act</i> <input type="checkbox"/> <i>MCL 750.350a, Parental Kidnapping Act</i> NOTE: Brackets will have to be manually checked.	PETITION	ORIG/PAAC	
<input type="checkbox"/> <i>Juvenile poses a credible threat to the physical safety of 1 or more persons named in item 8. **Needed for NCIC entry</i> NOTE: this line will always print.			
<i>IT IS ORDERED</i> <i>that the juvenile is placed on probation under the supervision of the above named probation officer for the term indicated, and the juvenile shall:</i> NOTE: This line will always print.			
2. <i>Not violate any criminal law of any unit of government.</i> NOTE: This line will always print.			
3. <i>Not leave the state without the consent of this court.</i> NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes																		
<p>4. <i>Make a truthful report to the probation officer monthly, or as often as the probation officer may require, either in person or in writing, as required by the probation officer.</i></p> <p>NOTE: This line will always print.</p>																					
<p>5. <i>Notify the probation officer immediately of any change of address or employment status.</i></p> <p>NOTE: This line will always print.</p>																					
<p><input type="checkbox"/> 6. <i>Not purchase or possess a firearm. **need for NCIC entry.</i></p> <p>NOTE: This line will always print.</p>																					
<p>7. <i>Pay the following to the court:</i></p> <table border="0"> <tr> <td><i>Fine</i></td> <td>\$ _____</td> </tr> <tr> <td><i>Costs</i></td> <td>\$ _____</td> </tr> <tr> <td><i>Restitution</i></td> <td>\$ _____</td> </tr> <tr> <td><i>Crime Victims Assessment</i></td> <td>\$ _____</td> </tr> <tr> <td><i>DNA sAMPLE Assessment</i></td> <td>\$ _____</td> </tr> <tr> <td><i>Forensic Fee Assessment</i></td> <td>\$ _____</td> </tr> <tr> <td><i>Supervision Fee</i></td> <td>\$ _____</td> </tr> <tr> <td><i>Other</i></td> <td>\$ _____</td> </tr> <tr> <td><i>Total</i></td> <td>\$ _____</td> </tr> </table> <p><input type="checkbox"/> <i>Total amount due shall be paid in installments of \$_____ per _____ starting on _____ and paid in full by the date on the judgment of sentence unless otherwise ordered. The supervision fee is payable immediately and applies to all delayed sentences. A supervision fee may not be ordered or collected for juveniles whose judgment of guilt has been deffered under MCL 750.350a. Fines, costs, and fees not paid within 56 days of the date owed are subject to a 20% late penalty on the amount owed.</i></p> <p>NOTE: Financial orders that are attached to this event will print on the order.</p>	<i>Fine</i>	\$ _____	<i>Costs</i>	\$ _____	<i>Restitution</i>	\$ _____	<i>Crime Victims Assessment</i>	\$ _____	<i>DNA sAMPLE Assessment</i>	\$ _____	<i>Forensic Fee Assessment</i>	\$ _____	<i>Supervision Fee</i>	\$ _____	<i>Other</i>	\$ _____	<i>Total</i>	\$ _____	FIN ORDER		
<i>Fine</i>	\$ _____																				
<i>Costs</i>	\$ _____																				
<i>Restitution</i>	\$ _____																				
<i>Crime Victims Assessment</i>	\$ _____																				
<i>DNA sAMPLE Assessment</i>	\$ _____																				
<i>Forensic Fee Assessment</i>	\$ _____																				
<i>Supervision Fee</i>	\$ _____																				
<i>Other</i>	\$ _____																				
<i>Total</i>	\$ _____																				
<p>8. <i>Other:</i></p> <p>NOTE: Other orders will print depending on entries made to the Results/Program fields.</p>																					
<p><i>Failure to comply with this order may result in a revocation of probation and incarceration.</i></p> <p><i>Signature Line</i></p> <p>NOTE: Two copies of this order will print with an additional paragraph for identifying information appearing on the second copy of this order.</p>																					

Approved, SCAO		STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER REMOVING CHILD AFTER EMERGENCY REMOVAL HEARING (CHILD PROTECTIVE PROCEEDINGS), PAGE 1	CASE NO. PETITION NO.
Court address			Court telephone no.	

1. In the matter of _____
(name(s), alias(es), DOB)

2. Date of hearing: _____ Judge/Referee: _____ Bar no. _____

THE COURT FINDS:

3. The court ordered temporary removal of the child(ren) and an emergency removal hearing was held under MCR 3.973(B)(3).

4. The parents, guardian, or legal custodian were present and/or attempts were made to secure the presence of each parent, guardian, or legal custodian.

5. The lawyer-guardian ad litem for the child(ren) was present.

6. Temporary removal from the home was necessary to protect the health, safety, or welfare of the child(ren) and it
☐ is ☐ is not necessary that removal continue pending the dispositional review hearing.

☐ 7. It is contrary to the welfare of the child(ren) to remain in the home because _____

NOTE: If child(ren) are removed, contrary to the welfare findings must be made at this hearing even if made at a prior hearing

☐ 8. The child(ren) are continued in the temporary custody of this court and are released to _____
Name of parent/guardian/legal custodian
_____ under the supervision of the Michigan Family Independence Agency
and subject to the terms and conditions in item 13.

☐ 9. The child(ren) are continued in the temporary custody of this court and placement is changed to the Family Independence Agency. It is recommended that the child(ren) be placed with _____.

10. In any relative placement, the following apply:

- a. The parent/guardian/legal custodian shall execute all documents necessary to release confidential information regarding the child(ren) including medical, mental, and educational reports. The parent/guardian/legal custodian of the child(ren), within 7 days, shall provide the supervising agency with the name and address of the medical providers for the child(ren). Any medical provider of the child(ren) shall release the medical records of the child(ren) to the supervising agency.
- b. If a home study has not yet been completed, then one shall be performed by the Family Independence Agency and a copy of the home study submitted to the court not more than 30 days after the placement.
- c. Upon request, the Family Independence Agency shall release to the foster parent the information concerning the child(ren) in accordance with MCL 712A.13a(13).
- d. Within 7 days after the child(ren) is/are placed in a relative's home, the Family Independence Agency shall perform a criminal record check and a central registry clearance.

(SEE SECOND PAGE)

Do not write below this line - For court use only

MCL 712A.13(9), (14), MCR 3.965(C), MCR 5.974(B)

JC 75 (6/03) ORDER REMOVING CHILD AFTER EMERGENCY REMOVAL HEARING (CHILD PROTECTIVE PROCEEDINGS),
PAGE 1

**Order Removing Child After
Emergency Removal Hearing
(Child Protective Proceedings)
06/03 - JC75**

This order can be generated from an event ADD or MOD. From the event screen, enter the date the hearing took place, the event type code and all data for the form. Enter 75 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name, DOB	
2. <i>Date of Hearing: Jude/Referee:</i>	EVENT	Date Jurist	
THE COURT FINDS			
3. <i>The court ordered temporary removal of the child(ren) and an emergency removal hearing was held under MCR 3.973(B)(3).</i> NOTE: This line will always print.			
4. <i>The parents, guardian, or legal custodian were present and /or attempts were made to secure the presence of each parent, guardian, or legal custodian.</i> NOTE: This line will always print.			
5. <i>The lawyer-guardian ad litem for the child(ren) was present.</i> NOTE: this line will always print.			
6. <i>Temporary removal from the home was necessary to protect the health, safety, or welfare of the child(ren) and it <input type="checkbox"/> is <input type="checkbox"/> is not necessary that removal continue pending dispositional review hearing.</i> NOTE: This line will always print.			
<input type="checkbox"/> 7. <i>It is contrary to the welfare of the child(ren) to remain in the home because _____.</i> NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
<input type="checkbox"/> 9. <i>The child(ren) are continued in the temporary custody of this court and placement is changed to the Family Independence Agency. It is recommended that the children be placed with ____.</i> NOTE: This line will always print.	EVENT	Legal Status Placement or Placement Type	TWC FIA
10. <i>In any relative placement, the following apply:</i> <i>a. The parent/guardian/legal custodian shall execute all documents necessary to release confidential information regarding the child(ren) including medical, mental and educational reports. The parent/guardian/ legal custodian of the child(ren), within 7 days, shall provide the supervising agency with the name and address of the medical providers for the child(ren). Any medical provider of the child(ren) shall release the medical records of the child(ren) to the supervising agency.</i> <i>b. If a home study has not yet been completed, then one shall be performed by the FIA and a copy of the home study submitted to the court not more than 30 days after the placement.</i> <i>c. Upon request, the FIA shall release to the foster parent the information concerning the child(ren) in accordance with MCL 712A.13a(13).</i> <i>d. Within 7 days after the child(ren) is/are placed in a relative's home, the FIA shall perform a criminal record check and a central registry clearance.</i> NOTE: This line will always print.			
11. <i>If the child(ren) are placed out of the home, the Director of the Michigan Family Independence Agency is appointed special guardian to receive any benefits now due or to become due the child(ren) from the government of the United States.</i> NOTE: This line will always print.			
12. <i>Parenting time is as follows:</i> NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
13. <i>Other:</i> NOTE: This line will print depending on entries made to the Results field.			
14. <i>This matter is set for dispositional review hearing before Hom. _____ on _____.</i> NOTE: This line will always print.			
<i>Signature Line</i>	EVENT	Sign Jurist	

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER OF DISPOSITION FOLLOWING POST-TERMINATION REVIEW HEARING (CHILD PROTECTIVE PROCEEDINGS)	CASE NO. PETITION NO.
Court address		Court telephone no.

1. In the matter of
(name(s), alias(es), DOB)

2. Date of hearing: _____ Judge/Referee: _____ Bar no. _____

3. By order, dated _____, the above named child(ren) were placed in the permanent custody of the court.

4. Notice of hearing for the post-termination review was served as required by law.

5. The court has considered the permanency plan and other evidence presented. Specific findings of fact and law regarding this proceeding have been made on the record.

THE COURT FINDS:

6. Based on
☐ the following findings (attach list if more space is needed)

☐ the report _____ dated _____
Identify type of report

☐ testimony of _____ backed up by written transcript
Name

reasonable efforts ☐ were ☐ were not made to place the child(ren) in a timely manner in accordance with the permanency plan and to complete those steps necessary to finalize the permanent placement of the child(ren).
 The permanency plan is _____.

7. Progress toward the child(ren)'s adoption or other permanent placement ☐ was ☐ was not made.

8. The child(ren)'s continued placement ☐ is ☐ is not necessary and appropriate.

9. The permanency planning goal ☐ is ☐ is not appropriate.

☐ 10. A foster family agreement/permanent relative placement is approved; according to MCL 712A.19(4) review hearings may be held every 182 days.

IT IS ORDERED:

☐ 11. The child(ren) are continued in the permanent custody of this court. It is recommended the child(ren)'s placement continue.
☐ The child(ren)'s commitment to the Children's Institute for adoption placement and planning continues.

☐ 12. The child(ren) has/have been adopted and jurisdiction of this court is terminated.

☐ 13. The child(ren) are over age 20 and jurisdiction of this court is terminated.

☐ 14. Other:

15. The next post-termination review hearing will be held _____
Date

Date _____ Judge _____

Do not write below this line - For court use only

JC 76 (6/03) ORDER OF DISPOSITION FOLLOWING POST-TERMINATION REVIEW
 HEARING (CHILD PROTECTIVE PROCEEDINGS)

MCL 712A.19, MCL 712A.19c,
 MCL 712A.20, MCR 3.978

**Order of Disposition Following
Post-Termination Review Hearing
(Child Protective Proceedings)
06/03 - JC76**

This order can be generated from an event ADD or MOD. From the event screen, enter the date the hearing took place, the event type code and all data for the form. Enter 76 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name, DOB	
2. <i>Date of Hearing: Jude/Referee:</i>	EVENT	Date Jurist	
3. <i>By order, dated _____, the above named child(ren) were placed in the permanent custody of the court.</i>			
NOTE: This line will always print.			
4. <i>Notice of hearing for the post-termination review was served as required by law.</i>			
NOTE: This line will always print.			
5. <i>The court has considered the permanency plan and other evidence presented. Specific findings of fact and law regarding this proceeding have been made on the record.</i>			
NOTE: this line will always print.			
6. <input type="checkbox"/> a. <i>Based on</i> <input type="checkbox"/> <i>the following findings</i> <input type="checkbox"/> <i>the report _____ dated _____</i> <input type="checkbox"/> <i>testimony of _____ backed up by written transcript</i> <i>reasonable efforts</i> <input type="checkbox"/> <i>were</i> <input type="checkbox"/> <i>were not made to place the child(ren) in a timely manner in accordance with the permanency plan and to complete those steps necessary to finalize the permanent placement of the child(ren).</i> <i>The permanency plan is _____.</i>			
NOTE: This line will always print.			
7. <i>Progress toward the child(ren)'s adoption or other permanent placement</i> <input type="checkbox"/> <i>was</i> <input type="checkbox"/> <i>was not made.</i>			
NOTE: This line will always print.			

Line From the Order Form	Screen	Field	Codes
8. <i>The child(ren)'s continued placement <input type="checkbox"/> is <input type="checkbox"/> is not necessary and appropriate.</i> NOTE: This line will always print.			
9. <i>The permanency planning goal <input type="checkbox"/> is <input type="checkbox"/> is not appropriate.</i> NOTE: This line will always print.			
<input type="checkbox"/> 10. <i>A foster family agreement/permanent relative placement is approved; according to MCL712A.19(4) review hearings may be held every 182 days.</i> NOTE: This line will always print.			
IT IS ORDERED: <input type="checkbox"/> 11. <i>The child(ren) are continued in the permanent custody of this court. It is recommended the child(ren)'s placement continue. <input type="checkbox"/> the child(ren)'s commitment to the Children's Institute for adoption placement and planning continues.</i> NOTE: This line will always print.	EVENT EVENT	Result Result	PCC MCI
<input type="checkbox"/> 12. <i>The child(ren) has/have been adopted and jurisdiction of this court is terminated.</i> NOTE: this line will always print.			
<input type="checkbox"/> 13. <i>The child(ren) are over age 20 and jurisdiction of this court is terminated.</i> NOTE: This line will always print.			
<input type="checkbox"/> 14. <i>Other:</i> NOTE: Other orders will print based on entries made in the results field.			
15. <i>The next post-termination hearing will be held _____.</i>	EVENT	Next Hearing	PTR
<i>Signature Line</i>	EVENT	Sign Jurist	

Approved, SCAO STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	Original - Court 1st copy - Subject MOTION AND ORDER TO SHOW CAUSE	2nd copy - Return Additional copies as needed PROBATE OSM CODE: MOT, OSC CASE NO.
Court address _____ Court telephone no. _____		
Plaintiff(s)/Petitioner(s)	v	Defendant(s)/Respondent(s)/Probationer
<input type="checkbox"/> Probate In the matter of _____ <input type="checkbox"/> Juvenile In the matter of _____		
MOTION AND AFFIDAVIT		
1. I am interested in this matter as _____.		
2. _____ has not complied with an order dated _____ Name (type or print) by failing to:		
3. I request an order directing _____ to show cause why: Name (type or print)		
<input type="checkbox"/> a. s/he should not be found in <input type="checkbox"/> civil <input type="checkbox"/> criminal contempt of court. <input type="checkbox"/> b. judgment should not be entered against him/her (as surety/agent) for the full amount of recognizance. <input type="checkbox"/> c. judgment should not be entered against him/her for failure to file a garnishee disclosure.		
_____ Signature		
Subscribed and sworn to before me on _____, _____ County, Michigan. Date		
My commission expires: _____ Signature: _____ Date		
<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;">ORDER</div>		
TO: _____ _____	If you require special accommodations to use the court because of disabilities, please contact the court immediately to make arrangements.	
IT IS ORDERED:		
4. You are ordered to appear before this court on _____ at _____ m. <input type="checkbox"/> the court address above at <input type="checkbox"/> courtroom number _____ <input type="checkbox"/> _____ to show cause why <input type="checkbox"/> you should not be held in <input type="checkbox"/> civil <input type="checkbox"/> criminal contempt for failure to comply with the order of this court <input type="checkbox"/> a judgment should not be entered against you <input type="checkbox"/> your case should not be dismissed <input type="checkbox"/> other: _____ for the reasons stated in the motion.		
5. Failure to appear for a contempt hearing may result in a bench warrant being issued for your arrest.		
6. A copy of this must be served <input type="checkbox"/> personally <input type="checkbox"/> by mail on the person ordered to appear at least _____ days before the hearing.		
Date _____ Judge _____ Bar no. _____		
MC 230 (6/03) MOTION AND ORDER TO SHOW CAUSE MCR 2.108(D), MCR 3.606(A), MCR 5.108		

Motion and Order to Show Cause 06/03 - MC230

This order can be generated from an event ADD or MOD. From the event screen, enter the date the hearing took place, the event type code and all data for the form. Enter 230 in the form number request field at the bottom of the screen and press <Enter>.

NOTE: In the event comment field, you will need to enter the party type code for the person this order is for. Example: F01. If you would like to include financial information on this order, enter FIN followed by the party type. Example: FIN F01

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name, DOB	
1. <i>I am interested in this matter as ____.</i> <u>NOTE: Name must be manually entered.</u>			
2. <i>____ has not complied with an order dated ____ by failing to:</i> NOTE: This line will always print. To include financial the event comment field must include FIN XXX (party type). This will print past due financial information for this party.	EVENT	Comment	Party Type
3. <i>I request an order directing ____ to show cause why:</i> <input type="checkbox"/> a. <i>S/he should not be found in</i> <input type="checkbox"/> <i>civil</i> <input type="checkbox"/> <i>criminal contempt of court.</i> <input type="checkbox"/> b. <i>judgement should not be entered against him/her (as surety/agent) for the full amount of recognizance.</i> <input type="checkbox"/> c. <i>judgement should not be entered against him/her for failure to file a garnishee disclosure.</i>	EVENT	Comments	Party
<i>Notary Public Information</i> NOTE: This line will always print.			
<i>To:</i> NOTE: The name and address will be entered by the system based on the name and address entered on the Event Comment Line.	EVENT	Comments	Party
4. <i>You are ordered to appear before this court on</i> <input type="checkbox"/> <i>the court address above</i> <i>At</i> <input type="checkbox"/> <i>courtroom number ____</i> <input type="checkbox"/> <i>_____ to show cause why</i> <input type="checkbox"/> <i>you should not be held in</i> <input type="checkbox"/> <i>civil</i> <input type="checkbox"/> <i>criminal contempt for failure to comply with the order of this court.</i> <input type="checkbox"/> <i>a judgment should not be entered against you</i> <input type="checkbox"/> <i>your case should not be dismissed</i> <input type="checkbox"/> <i>Other _____</i> <i>for the reason stated in the motion.</i> NOTE: This line will always print.	EVENT	Next Hearing	

Line From the Order Form	Screen	Field	Codes
5. <i>Failure to appear for a contempt hearing may result in a bench warrant being issued for your arrest.</i> NOTE: This line will always print.			
6. <i>A copy of this must be served <input type="checkbox"/> personally <input type="checkbox"/> by mail on the person ordered to appear at least ___ days before the hearing.</i> NOTE: This line will always print.			
Signature Line			

[illegible]

Report of Non Payment of Restitution 03/02 - MC258

This order can be generated from an event ADD or MOD. From the event screen, enter the date the hearing took place, the event type code and all data for the form. Enter 258 in the form number request field at the bottom of the screen and press <Enter>.

NOTE: In the event comment field, you will need to enter the party type code for the person this order is for. Example: F01.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name, DOB	
1. <i>Payment of restitution was ordered as a condition of probation for the above named individual. Upon review of the case as required under statute, I have determined that the probationer has not paid restitution as ordered</i> NOTE: This line will always print.			
2. <i>The amount of the arrearage was \$ __ as of __.</i>	FIN ORDER EVENT	Cost Type Date	RST
3. <i>The reasons for the arrearage are:</i> NOTE: 5 lines are available to enter reasons.			
<i>I declare that the statements above are true to the best of my information, knowledge, and belief.</i> <i>Certificate of Mailing</i> <i>Signature Lines</i>			

Approved, SCAO	Original - Court 1st copy - Plaintiff 2nd copy - Defendant	PROBATE OSM CODE: ADJ									
STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	ORDER FOR ADJOURNMENT	CASE NO.									
Court address _____	Court telephone no. _____										
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"> Plaintiff/Petitioner <input type="checkbox"/> People of the State of Michigan <input type="checkbox"/> _____ <input type="checkbox"/> Civil <input type="checkbox"/> Criminal </td> <td style="width: 5%; text-align: center; vertical-align: middle;">v</td> <td style="width: 45%; padding: 5px;"> Defendant(s)/Respondent(s)/Minor(s) </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> <input type="checkbox"/> Probate <input type="checkbox"/> Juvenile In the matter of _____ </td> </tr> <tr> <td style="height: 100px; vertical-align: top; padding: 5px;">Plaintiff's/Petitioner's attorney, bar no., address, and telephone no.</td> <td colspan="2" style="height: 100px; vertical-align: top; padding: 5px;">Defendant's/Respondent's attorney, bar no., address, and telephone no.</td> </tr> </table>			Plaintiff/Petitioner <input type="checkbox"/> People of the State of Michigan <input type="checkbox"/> _____ <input type="checkbox"/> Civil <input type="checkbox"/> Criminal	v	Defendant(s)/Respondent(s)/Minor(s) 	<input type="checkbox"/> Probate <input type="checkbox"/> Juvenile In the matter of _____			Plaintiff's/Petitioner's attorney, bar no., address, and telephone no.	Defendant's/Respondent's attorney, bar no., address, and telephone no.	
Plaintiff/Petitioner <input type="checkbox"/> People of the State of Michigan <input type="checkbox"/> _____ <input type="checkbox"/> Civil <input type="checkbox"/> Criminal	v	Defendant(s)/Respondent(s)/Minor(s) 									
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Plaintiff's/Petitioner's attorney, bar no., address, and telephone no.	Defendant's/Respondent's attorney, bar no., address, and telephone no.										
<p>THE COURT FINDS:</p> <p>1. _____ moved for an adjournment of _____ trial Name hearing _____</p> <p>presently set on _____ at _____ m. before _____ Date Time Judge/Referee/Magistrate</p> <p>IT IS ORDERED:</p> <p><input type="checkbox"/> 2. This <input type="checkbox"/> trial is adjourned to _____ hearing Date, time, and location _____ _____ for the following reasons: _____ _____ _____</p> <p><input type="checkbox"/> Costs are assessed in the amount of \$ _____ payable to _____ by _____</p> <p><input type="checkbox"/> 3. This request is denied.</p>											
Date _____	Judge _____	Bar no. _____									

Order for Adjournment 09/01 - MC309

This order can be generated from an event ADD or MOD. From the event screen, enter the date the hearing took place, the event type code and all data for the form. Enter 309 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name, DOB	
<i>THE COURT FINDS:</i> 1. _____ moved for an adjournment of <input type="checkbox"/> trial <input type="checkbox"/> hearing <input type="checkbox"/> _____ presently set on _____ at _____ before _____. NOTE: This line will always print.			
<i>IT IS ORDERED:</i> 2. This <input type="checkbox"/> trial <input type="checkbox"/> hearing <input type="checkbox"/> _____ is adjourned to _____ _____ for the following reasons: NOTE: The location will be printed from the File Maintenance , places or courtroom file.	FIN ORDER EVENT	Cost Type Date	RST
<i>Signature Line</i>			